

**EVALUATION FORM FOR MENTORS / SUPERVISORS**

**Student’s data:**

Student’s name: ………………………………………………………………………………………………………………………………………….

NEPTUN code: ……………………………

Mode of study: full time / correspondence / evening *(Corresponding shall be underlined!)*

Name of study program: ……………………………………………………

Start and end date of the compulsory internship: ……………………… ………………………

Number of completed working hours: ………………….. hour(s)

**Employer’s data:**

Name of the internship place: ……………………………………………………………………………………………………………….

Registered seat of the internship place: …………………………………………………………………………………………………………

Name of the supervisor responsible for the internship: …………………………………………………………………………….

E-mail address: …………………………………….................................... Phone number: ………………………………......................

1. **Please evaluate the student’s work during the internship based on the following aspects (please mark with X)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Failed** | **To be developed** | **Passed** | **Beyond expectations** | **Exceptional\*** |
| The student performed the work accurately and professionally |  |  |  |  |  |
| The student showed problem-sensitive, proactive behavior during work  |  |  |  |  |  |
| The student was constructive, cooperative and proactive in projects and group tasks |  |  |  |  |  |
| The student was receptive to new information, new professional knowledge and methodologies |  |  |  |  |  |
| The student was open and flexible to take on new tasks and responsibilities that required cooperation |  |  |  |  |  |
| The student sought to develop knowledge and working relationships and cooperate with other colleagues |  |  |  |  |  |
| Even in unexpected situations, the student tried to make decisions in full compliance with the law and ethical norms  |  |  |  |  |  |
| The student was receptive to the opinions of others |  |  |  |  |  |
| The student performed the tasks specified in the job description independently under general professional supervision |  |  |  |  |  |
| The student took responsibility for their analyzes, conclusions, and decisions |  |  |  |  |  |

\*Comments on the student’s activities, in case of exceptional ability:

|  |
| --- |
| …  |

1. **Considering the above aspects, the grade suggested to the student’s internship by the workplace manager is (corresponding shall be marked with an X):**

□ Excellent = 5 □ Good = 4 □ Satisfactory = 3 □ Sufficient = 2 □ Fail = 1

 Date: …………………………………………

 …………………………………………………………..

workplace manager’s

(name)

(position)

(company’s name)

signature l.s.

**Submit the “Request for ending the mandatory internship” Neptun request to complete the internship via Neptun and upload the Evaluation form and the Internship report as attachments within 5 working days of the last day of your internship. The Evaluation form can be accepted scanned or signed with a digital signature. You do not need to submit the hard copies of the documents.**