

**Mid-Term Evaluation
Internship, Practicum, & Field Experience
Higher Education Administration & Student Personnel
HIED 6/76492**

Internship Student _____

On-site Supervisor _____

Please circle the response that most accurately corresponds with the above named Graduate Practicum Student's rate of progress toward the goals of his or her Practicum Plan.

Poor		Satisfactory		Outstanding
1	2	3	4	5

Comments (please print or attach a separate typed sheet and base comments on criteria listed in the Internship Manual):

On-site Supervisor's signature

Date

Title

Address

Mid-term Evaluations are due following completion of the 75 clock hour.

Please return to the KSU faculty member/supervisor responsible for the on-site visit. The name, address, phone number, and e-mail will be provided by the student.