**INTERNSHIP CERTIFICATE & EVALUATION FORM**

Student’s Name and Surname:

University:

Dates of the internship:

Department(s) where student was employed:

**Please evaluate the student on the following points and also grade them from 1 to 5; 5 being the best mark**.

1. Attendance: Did the student come regularly and on time to work?
2. Adaptability: Did the student easily adapt to the working environment?
3. Language skills: Was student’s level of foreign language sufficient for tasks required?
4. Efficiency and success: Was the work produced by the student adequate and did it meet your expectation?
5. General evaluation: Was it a successful internship experience in general? Do you think that s/he has contributed to your working environment? Could you describe the added value for your institution?

Name and position of the supervisor:

Date:

Signature: Stamp of the institution: