



Interim Evaluation Form

**Wiess School of Natural Sciences
Professional Science Master's Program Internships**
Interim Evaluation Form for Employers

Student Name: _____ Date: _____

Company/Organization: _____

Supervisor: _____ Phone #: _____

Is the intern working on a project or performing work identified in the *Internship Definition Document*? _____

Please describe the project and/or your intern's responsibilities if different from planned responsibilities:

On a scale of 1 – 5, where 1 is low and 5 is very high, please rate your level of satisfaction in the intern's performance level

1 2 3 4 5

Comments & Feedback (please use this space to address any issue that need to be resolved):

• **Please return this form to:**

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