

# Mid-Term Internship Mentor Feedback Form

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Internship Mentor Name: \_\_\_\_\_

Internship Institution: \_\_\_\_\_

Intern Name: \_\_\_\_\_

Date: \_\_\_\_\_

	<b>The intern I supervise</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Not Sure</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
1.	... is a benefit to my organization.					
2.	... is well prepared for this internship experience.					
3.	... is responsible (i.e. prompt for appointments).					
4.	... works well with colleagues.					
5.	... works well with clients/patients/customers.					
6.	... benefits from the internship experience.					

	<b>Upon reflection</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Not Sure</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
7.	... I am looking forward to recruiting additional Undergrad Psych interns in the future.					
8.	... I enjoy mentoring this intern.					
9.	... I realize I need an intern with different skill sets or interests than the current intern.					
10.	... I realize I need to be contacted by the internship coordinator to discuss some aspect of the current internship or future internships.					

Please comment here: