Faculty Approval _		
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## Longwood University Theatre Internship Approval and Evaluation Form

## To the Intern

The internship is a means for you to gain valuable experience in a career that interests you. To this end the University and the Department expect that you will choose your internship carefully, and that you will do your best to represent yourself, the school, and the department in such a way that you and those who come after you would be welcome in the organization.

This internship requires that you be registered for THEA 492, complete 150 hours of work in the organization, and complete the assignments that are required during and after your internship experience. Please complete the top portion of this form, attach an internship description (see *Internship Instructions* for details), and return both to the Theatre Program Coordinator in CSTAC.

Student Information Intern's Name	Student ID#	
Longwood Address		
Phone Number: Home/Cell:		
Email address during internship		
Organization Information Name of Organization		
Supervisor		=
Phone	email	
Approximate dates of internship		

## To the Internship Supervisor

We are pleased that you have selected one of our students for an internship in your organization. We are confident that the internship experience will be a rewarding one for all parties involved. If you have any questions about the internship program at any time please contact:

(Name of Instructor of Internship Class)
Theatre Program
Longwood University
201 High Street
Bedford 102
Farmville, VA 23909
(434) 395-2285
mcqueenjg@longwood.edu

At the conclusion of the internship, please take a few minutes to complete the form on the back of this page, and sign as indicated below. Thank you for your participation in Longwood's Internship Program.

Please circle the number that best represents your observations of the intern's performance in each of the following categories:

	Excellent	Good	Average	Below Average	Poor	N/A
Motivation	5	4	3	2	1	0
Professional Attitude	5	4	3	2	1	0
Professional Demeanor	5	4	3	2	1	0
Preparation for Professional Work	5	4	3	2	1	0
Cooperation	5	4	3	2	1	0
Willingness to Work	5	4	3	2	1	0
Punctuality	5	4	3	2	1	0
Appropriateness of Dress	5	4	3	2	1	0
Oral Communication Skills	5	4	3	2	1	0
Written Communication Skills	5	4	3	2	1	0
Interpersonal Skills	5	4	3	2	1	0
Knowledge of the Field	5	4	3	2	1	0
Maturity	5	4	3	2	1	0
Resourcefulness	5	4	3	2	1	0

Please circle the appropriate number to the right of each question.

	Very Likely	Likely	Undecided	Unlikely	Highly Unlikely
If a position was available, would you hire this person?  (All parties recognize that answers to this question DO NOT constitute an offer of employment)	5	4	3	2	1
Would you recommend this person to another organization?	5	4	3	2	1
Would you be willing to sponsor other Longwood interns?	5	4	3	2	1

other Longwood interns?	5	4	3	2	1		
Please use the space below to provide any additional comments about the intern or internship program. (You are welcome to attach additional sheets if you are so inclined.)							
Internship Supervisor Signature							