



**Center for Advanced Studies in Engineering**  
**Student Internship Evaluation Form**  
**B.Sc. Electrical Engineering.**

The purpose of this evaluation form is to solicit your opinion about the performance of students during their course of Internship at your organization. We appreciate your honest and objective response.

- Student's Name & Registration Number: \_\_\_\_\_
- Organization/Company of Internship: \_\_\_\_\_
- Duration of Internship in weeks & Working days per week: \_\_\_\_\_

Please evaluate the student's performance and conduct during Internship training by encircling the appropriate number on the scale of 0 to 10, (10 being outstanding).

**1. Professional knowledge & skill.**

0	1	2	3	4	5	6	7	8	9	10
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**2. Ability of student to apply his/her knowledge.**

0	1	2	3	4	5	6	7	8	9	10
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**3. Analytical approach towards solving a problem.**

0	1	2	3	4	5	6	7	8	9	10
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**4. Capability to adapt to a new working environment.**

0	1	2	3	4	5	6	7	8	9	10
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**5. Initiative and drive.**

0	1	2	3	4	5	6	7	8	9	10
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**6. Ability to meet the given target in a given time duration.**

0	1	2	3	4	5	6	7	8	9	10
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**7. Self-reliance in accomplishing the project.**

0	1	2	3	4	5	6	7	8	9	10
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**8. Ability to cooperate with associates.**

0	1	2	3	4	5	6	7	8	9	10
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**9. Punctuality and discipline.**

0	1	2	3	4	5	6	7	8	9	10
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**10. Interpersonal skills.**

0	1	2	3	4	5	6	7	8	9	10
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**Project Assigned (if any):** \_\_\_\_\_

**Percentage of Assigned Project completed:**

Below 50%	50%	80%	90%	100%
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**Remarks:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

