

HEALTH LAW EXTERNSHIP FINAL EVALUATION FORM

This form should be completed by the externship supervisor at the end of the externship term. This form should be returned to the Beazley Institute Assistant Director, Megan Bess, by email at mbess@luc.edu, fax at 312-915-6212.

To Externship Supervisor: Please complete this final evaluation of your Loyola student extern. Discuss your feedback with the student extern and submit this to the Assistant Director listed above.

Externship Site: _____

Loyola Student Extern: _____

Supervisor Completing This Form: _____

Supervisor Email: _____ Supervisor Phone: _____

1) How well did the student grasp the underlying principles and goals of the assigned work?

Excellent 1 2 3 4 5 Poor

Comments:

2) How well did the student display the necessary skills to complete the assigned work?

Excellent 1 2 3 4 5 Poor

Comments:

3) Rate the overall quality of the student's work.

Excellent 1 2 3 4 5 Poor

Comments:

4) Rate Loyola's externship program, including communication with you, responsiveness to concerns, etc.

Excellent 1 2 3 4 5 Poor

Comments:

5) How often did you meet with the student to review his/her work and/or provide feedback?

6) Would you hire another Loyola student extern in the future?

Supervisor Signature & Date

For Internal Use Only Date Received _____ Action _____

Notes _____