



## Emerging Technologies Biotechnology Department



# *Biotechnology Laboratory Technology Program*

## *Student Internship Handbook*

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## Philosophy

***An internship through the SF Biotechnology program is an opportunity for the student to expand or enhance their laboratory skills in a career related environment where they will participate in planned, supervised work.***

The internship should contribute to the student's personal and professional development by providing a work environment where they can apply their academic knowledge, explore a career path, and begin to establish a network of professional contacts. It is coordinated by SF faculty to develop a mutually beneficial experience for the both the student and the site mentor.

The internship site determines if monetary compensation is available. The length of the internship is 240 clock hours. The schedule is dictated by the student's availability and requirements of the workplace. There is a 3 credit web-based class designed to augment the practical experience. This class will include a reflection and evaluation process at the conclusion.

Internships are most successful when the student, the SF Biotech faculty, and the employer all share the responsibility in making it a positive experience. The site is expected to provide a supervisory component that is mentoring and educational. It should be a career related experience that complements what was learned in the classroom. SF faculty are expected to monitor the student's progress and offer encouragement and support to make the experience positive for both the student and the site. The student is expected to have good attendance, be prompt and act professionally at all times.

## Roles and Responsibilities

A successful internship requires a strong collaboration to be formed with all parties involved: student, faculty internship instructor, academic advisor, internship-site supervisor, and Director of SF College Perry Center for Emerging Technologies. The roles that each one plays in the academic internship experience follows:

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### Student

- Register for the internship course during the semester following the completion of all course prerequisites. The completed course prerequisites should include, but are not limited to, all science courses, the biotech core classes, and statistics.
- With the assistance of the faculty internship instructor, and the academic adviser, investigate, identify, and secure an internship experience that best meets your educational and personal goals.
- Determine learning opportunities and educational objectives available through the internship and formulate your action plan with the assistance of the faculty internship instructor.
- Make sure health insurance and immunizations are up to date.
- Present yourself in a professional manner at all times. You are representing your college and your program.

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### Internship

- Ensure that prerequisites are satisfied by the student prior to scheduling the internship course.
- Assist student in the identification of internship opportunities, although ultimate responsibility for locating a site resides with the individual student.
- Determine the appropriateness of the proposed internship experience.
- Give final approval for internship.
- Track student progress throughout the semester.
- Schedule a personal or electronic contact with work-site supervisor to establish a working relationship that will benefit the student.
- Coordinate necessary paperwork throughout the internship period including preparation of learning agreements and completion of preliminary, mid-semester and final evaluations.
- After consultation with work-site supervisor, determine grading rubric. Evaluate student performance, assign grade, and post it.
- Maintain records of internship opportunities to enable front-end exploration by future students.

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## Academic Advisor

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- Continue to maintain contact with student.
- Informally assist student in identification of internship opportunities and procedures. Informally keep abreast of student's internship progress.
- Prior to having the student submit the *Student Internship Application Form*, check to be sure that all course prerequisites have been satisfied.

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## Internship Site Supervisor

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- Provide a professional environment conducive to student learning.
- Set goals for internship experience. Collaborate with faculty internship instructor to establish specific learning objectives; identify outcomes or expected products.
- Participate in the selection of student interns.
- Help student build professional work-site relationships.
- Supervise the student throughout the internship experience at the work-site. Offer an orientation program and supply necessary resources to support student success.
- Provide supervision, guidance, and feedback.
- Report immediately to the faculty internship instructor any student problem that develops.
- Work directly with the faculty internship instructor to evaluate the student performance, possibly three times: preliminarily during the first few weeks, at a mid-point in the internship experience, and at the end of the experience.
- Sign *SF College Biotechnology Internship Affiliation Agreements* as appropriate.

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## Director, SF College Perry Center for Emerging Technologies

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- Keep abreast of the faculty internship instructor's involvement with internships. Assist (on occasion) faculty in the identification of internship opportunities, although ultimate responsibility for locating a site resides with the individual student.
- Provide support for faculty internship instructor and assist with the management of the internship process.
- Administer *SF College Biotechnology Internship Affiliation Agreement* in accordance with College policy.

## SF Policies

**Americans with Disabilities Act (ADA):** If you are a student with a disability: In compliance with Santa Fe College **policy and equal access laws, we are** available to discuss appropriate academic accommodations that you may require as a student with a disability. Request for academic accommodations need to be made during the first week of the semester, except for unusual circumstances, so arrangements can be made. You must be registered with Disabilities Resource Center (DRC) in S-229 for disability verification and determination of reasonable academic accommodations

**Student Rights & Responsibilities:** The purpose of this document is to provide students with a general overview of both their rights and responsibilities as **members of the Santa Fe College** community. For a complete list of students' rights and responsibilities go to:

[http://dept.sfcollege.edu/StudentAffairs/content/media/Right\\_and\\_Responsibilities.pdf](http://dept.sfcollege.edu/StudentAffairs/content/media/Right_and_Responsibilities.pdf)

and for grievances, go to:

[http://www.sfcollege.edu/studentaffairs/?section=student\\_complaint\\_procedures](http://www.sfcollege.edu/studentaffairs/?section=student_complaint_procedures)

**EA/EO notice:** "Santa Fe College is committed to an environment that embraces diversity, respects the rights of all individuals, is open and accessible, and is free of harassment and discrimination based on, but not limited to, ethnicity, race, creed, color, religion, age, disability, sex, marital status, national origin, genetic information, political opinions or affiliations, and veteran status in all its programs, activities and employment. EA/EO notice Inquiries regarding non-discrimination policies should be directed to: Lela Frye, Equal Access/Equal Opportunity Coordinator 3000 NW 83rd Street, R-Annex, Room 105, Gainesville, Florida 32606, (352) 395-5420, [lela.frye@sfcollege.edu](mailto:lela.frye@sfcollege.edu)."

**Grievance Procedure:** Santa Fe College seeks to maintain open avenues for students who wish to lodge complaints. To provide these avenues, the College maintains a responsive system designed to address and resolve student complaints.

The complaint process has a basic, tripartite structure:



While the College encourages students to resolve issues informally whenever possible, it also realizes that informal resolutions are not also practical. When informal means do not resolve the complaint, students may avail themselves of the College's formal complaint process. The following table provides a brief summary of the College's procedures regarding informal and formal complaints as well as appeals.

Student Action	SF Procedure
Informal Student Complaints	Students are recommended to address the issue directly with party/parties involved; if the issue remains unresolved, then students are recommended to seek resolution through formal means.
Formal Student Complaints about Discrimination and/or Harassment	Students may contact any SF employee regarding such a complaint; that employee is then required by SF Rule 2.8P to forward that complaint to the designated authorities. Students may also contact administrators whose responsibilities directly address such issues, such as: The President or Provost The Director of Human Resources The Associate Vice Presidents for Academic Affairs or for Student Affairs
Informal Student Appeals about Academic Issues	Students are recommended to address the issue directly with party/parties involved; if the issue remains unresolved, then students are recommended to seek resolution through formal means.
Formal Student Appeals about Academic Issues	Students are required to follow the procedures designated for the subject(s) of appeal. Examples include: Overloads (AVP of Academic Affairs or Ombudsperson). Exceptional withdrawals (Same administrators and/or the Petitions Committee) Access to records (Records)

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## Appendix List

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**APPENDIX A: Internship Timeline Checklist**

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**APPENDIX B: Internship Registration Form**

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**APPENDIX C: Internship Release & Agreement Forms**

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**APPENDIX D: Educational Plan & Learning Agreement**

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**APPENDIX E: Student's Evaluation - Preliminary**

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**APPENDIX F: Student's Evaluation - Mid Semester**

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**APPENDIX G: Student's Evaluation - Final**

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**APPENDIX H: Supervisor Evaluation - Final**

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## Internship Timeline Checklist

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Student Email: \_\_\_\_\_

Student Cell: \_\_\_\_\_

\*All forms must be returned to the Internship Coordinator by the dates indicated below.

Required Forms	Due Date
<i>Registration</i>	
Internship Registration Form	Prior to Registration
Internship Release & Student Agreement Form	Prior to Registration
Educational Plan & Learning Agreement	Prior to Registration
Proof of Health Insurance & Immunizations	Prior to Registration
<i>Evaluations</i>	
Preliminary Evaluation Form	End of Second Week of Internship
Mid-point Evaluation	Mid-point of Internship
Final Evaluation	One Week Prior to End of Internship
Supervisor Evaluation	End of Internship

**Contact internship coordinator with any questions.**  
**Email: [mary.elsemarani@sfcollge.edu](mailto:mary.elsemarani@sfcollge.edu)**  
**Phone: (352)381-3755**



## Internship Registration Form

### Student

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

Student ID: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

### Internship Site Supervisor

Organization: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### Internship SF Faculty Supervisor

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

Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### Internship SF Biotech Coordinator

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

Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

## Internship Registration Form – page 2

**Position Description:** Please attach a description of internship responsibilities, projects, etc.

- A. As deemed capable, I will assume additional responsibilities. I will not, however, routinely perform duties general considered below the paraprofessional level.
- B. I will work a total of \_\_\_\_\_ hours on site over \_\_\_\_\_ weeks (one [1] credit per 40 internship hours).
- C. I intend to work, not to work, (circle one) over holidays or semester breaks during my internship.

I have reviewed the attached internship description and the conditions stated above. I understand that, together, they serve as a commitment on my part for the practical component of the internship authorized by Santa Fe College Biotechnology Program. To receive academic credit for an internship, an "Educational Plan & Learning Agreement" will be completed and filed by me with my faculty sponsor for the internship prior to commencing the internship.

Student	Student Signature	Date
Work-Site Supervisor	Work-Site Supervisor Signature	Date
Faculty Internship Supervisor	Faculty Supervisor Signature	Date

**For use by the SF Internship Coordinator:**

<u>Student</u>	<u>Work-Site Supervisor</u>
<input type="checkbox"/> Registration Form	<input type="checkbox"/> Preliminary Evaluation
<input type="checkbox"/> Internship Release & Student Agreement Form	<input type="checkbox"/> Mid-Point Evaluation
<input type="checkbox"/> Educational Plan and Learning Agreement	<input type="checkbox"/> Final Evaluation

**Return completed original to the SF College internship coordinator.**  
**Email: [mary.elsemarani@sfcollge.edu](mailto:mary.elsemarani@sfcollge.edu) Phone: (352)381-3755**

## Internship Release and Agreement Forms – page 1 of 2

### Internship Release

Student's Name:	_____
Student I.D.	_____
Internship Site:	_____
Dates of Internship:	_____

1. During the dates shown, I will be performing my student internship.
2. I will be performing this internship to gain experience in a field related to my academic and career goals. If this is an unpaid internship, I understand that no employer-employee legal relationship will exist between the supervising organizing and me.
3. I will be performing this internship voluntarily and upon my own initiative, risk, and responsibility.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.

\_\_\_\_\_ Student's Signature

**Return completed original to the SF College internship coordinator.**

**Email: [mary.elsemarani@sfcollge.edu](mailto:mary.elsemarani@sfcollge.edu) Phone: (352)381-3755**

## Internship Release and Agreement Forms – page 2 of 2

### Student Agreement

The SF College Biotechnology program internship is an academic academic/practical course offered by SF College. Therefore, I agree to abide by the standards established by The College and agree to comply with the following obligations:

1. I will meet with my program coordinator to discuss an internship experience that best suits my personal and career goals.
2. I will conduct myself in a professional manner in all correspondence and interactions with prospective host sites and with SF College faculty and staff with whom I consult regarding the internship.
3. I agree to consider all offers carefully before accepting an internship position. Once I have accepted an offer, I am obliged to honor my acceptance.
4. I will inform the Biotechnology Coordinator with any changes to my current address, phone number, and email address while participating in the internship. I will check my Angel account and personal or SF (whichever I have indicated as my primary) email once a day.
6. If I am an international student, I will meet/talk with a representative of the International Student Office to discuss employment and educational requirements prior to registering for internship.
7. If I plan to graduate the semester I am interning, I must turn in all required assignments by the deadline(s) established in the Educational Plan and Learning Agreement. Failure to meet this obligation will result in failure to graduate on time.

Dated this the \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.

\_\_\_\_\_ Student's Signature

**Return completed original to the SF College internship coordinator.**

**Email: [mary.elsemarani@sfcollge.edu](mailto:mary.elsemarani@sfcollge.edu) Phone: (352)381-3755**

## Educational Plan and Learning Agreement – page 1 of 3

Semester \_\_\_\_\_ Year \_\_\_\_\_

Internship Site \_\_\_\_\_

Start Date \_\_\_\_\_

Address \_\_\_\_\_

Student \_\_\_\_\_

\_\_\_\_\_

Address during Internship \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor Name \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_

**NOTE:** This Agreement must be completed and signed by all parties (student, faculty internship instructor, work-site supervisor), and returned to the Biotechnology coordinator prior to beginning the internship.

### Components:

1. Suggested Bibliography
2. Academic Objectives & Learning Methods
3. Methods of Evaluation and Timeline
4. Signatures

## Educational Plan and Learning Agreement – page 2 of 3

**Suggested Bibliography of Related Readings:** Consult with your faculty internship instructor and with your work-site supervisor. Attach a separate sheet, if necessary.

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- 1. **Academic Objectives & Methods of Learning:** With assistance from the faculty internship instructor, the student will determine learning opportunities possible through the internship and will formulate 3 to 5 learning objectives. The objectives should be specific, measurable, and attainable.

The objectives and methods should be approved by the faculty internship instructor and understood by the work-site supervisor.

**Academic Objectives  
(What I hope to learn.)**

**Learning Methods  
(How will I learn this?)**

- A.
- B.
- C.
- D.
- E.

## Educational Plan and Learning Agreement – page 3 of 3

### Methods of Academic Evaluation & Timeline for Completion of Assignments

Evaluation Tool/Assignment (e.g., journal entries, draft and/or final papers, portfolio, public presentation)	Due Date/Frequency of Submission (e.g., weekly, bi-weekly, mid-term)
A	
B	
C	
D	
E	

**NOTE:** If circumstances should prevent the completion of any of the commitments stated above, I understand that the parties signing this agreement must be consulted and give their approval prior to any other action. If I default on any part of this agreement, I understand that I may receive a lower grade for the internship experience.

I understand that the final grade for my internship is given by the faculty internship instructor with the advice of the work-site supervisor. The work-site supervisor is expected to complete several evaluations of my performance.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

I have developed the above Educational Plan & Learning Agreement in consultation with the student. I agree to work with the student to facilitate the success of the internship and to objectively evaluate and grant credit as stated above for completed assignments.

Faculty Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed the above Educational Plan & Learning Agreement. I agree to assist the student to achieve his or her educational objective as stated above.

Work-Site Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Student's Evaluation of Internship – Preliminary

**NOTE:** It is your responsibility to notify your faculty internship instructor regarding any aspect of your experience you believe warrants immediate action.

Student's Name:	_____
Student I.D.	_____
Internship Site:	_____
Dates of Internship:	_____

1. My internship (circle one) is is not working out well.
2. In the space below please summarize the quality of your internship experience so far.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Student Signature: \_\_\_\_\_

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



## Student's Evaluation of Internship – Mid Semester

Student's Name:	_____
Student I.D.	_____
Internship Site:	_____
Dates of Internship:	_____

1. With what aspects of your internship are you most satisfied? (Please continue on the reverse.)
  
2. With what aspects of your internship are you least satisfied? (Please continue on the reverse.)
  
3. What additional assistance or information from the site supervisor and/or faculty sponsor would help you learn or achieve more in your internship? (Please continue on the reverse.)

Student Signature: \_\_\_\_\_  
\_\_\_\_\_

Date:

## Student's Evaluation of Internship – Final page 1 of 2

Student's Name:	_____
Student I.D.	_____
Internship Site:	_____
Dates of Internship:	_____

Instructions: The purpose of this form is to provide opportunity for an honest appraisal of the internship site, your works-site supervisor, and their contributions to your educational program. Please respond honestly and objectively to the following statements and questions.

1. Please answer the following questions

- |    |                                                                      |     |    |           |
|----|----------------------------------------------------------------------|-----|----|-----------|
| a. | Would you work for this supervisor again?<br>Explain:                | Yes | No | Uncertain |
| b. | Would you work for this organization again?<br>Explain:              | Yes | No | Uncertain |
| c. | Would you recommend this organization to other students?<br>Explain: | Yes | No | Uncertain |

## Student's Evaluation of Internship – Final page 2 of 2

4	Excellent	Exceeded Expectations
3	Good	Consistently Met Expectations
2	Fair	Inconsistently Met Expectations
1	Unsatisfactory	Rarely Met Expectations

4      3      2      1      N/A

*The Internship Organization...*

Maintained an educational environment

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Maintained a friendly and cooperative work environment

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Established and communicated clear goals and expectations

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*My Internship Supervisor...*

Provided levels of responsibility consistent with my ability

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Provided challenging work assignments

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Offered regular, constructive feedback on my performance and progress

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Attempted to make my internship an educationally meaningful experience

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*My Internship provided an opportunity to...*

Use knowledge/skills gained through my academic program

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Develop my interpersonal communication skills

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Develop my critical thinking and problem-solving skills

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Demonstrate initiative

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*Overall...*

I would rate the quality of my internship as . . .

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Student Signature: \_\_\_\_\_

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

### Student Attendance Record

Affiliate Site: \_\_\_\_\_  
 Rotation Start Date: \_\_\_\_\_

Student: \_\_\_\_\_  
 Manager: \_\_\_\_\_

Week 1	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Week 2	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Week 3	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Week 4	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Week 5	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Week 6	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hrs	Tech. Initials	Absent Hrs	Absent Reason	Excused Y/N
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											

### Affiliate Supervisor Final Evaluation of the Student (Part 1/3)

Student Name: \_\_\_\_\_

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

Affiliate Location: \_\_\_\_\_

Supervisor: \_\_\_\_\_

**Directions to clinical faculty:** Select the number that best describes the student’s performance during this rotation. Write NA, if you are unable to rate the student in a particular category. Summary comments are required if the student need improvement or is unsatisfactory and are always encouraged.

**(U) Unsatisfactory:** Student consistently did not display desired skill or behavior

**(S-) Needs Improvement:** Student requires constant, detailed supervision in order to perform in the laboratory. Skills or behaviors at times are below that expected of an entry-level technologist

**(S) Meets Expectations:** Student demonstrates acceptable skill or behavior for entry-level technologist the majority of the time

**(S+) Exceeds Expectations:** Student demonstrates above average skill and knowledge.

Always displays appropriate professional behaviors.

#### Knowledge & Skills

S+=Exceeds expectations, S=Meets expectations, S-=Needs Improvement, U= Unsatisfactory, N/A

<i>Observed Outcome</i>	
Adheres to all safety procedures	
Follows laboratory testing procedures and protocols. Is attentive to instruction and able to follow written and verbal instructions	
Learns new procedures in a reasonable amount of time	
Demonstrates knowledge of assigned readings	
Questions asked are appropriate and discerning	
Recognizes normal and abnormal results	
Understands the theoretical basis for laboratory tests and is able to recognize significance of tests results	
Plans and organizes work effectively and efficiently	
Demonstrates knowledge of guidelines for reporting data, entering patient results into the computer and can determine acceptability of data generated	
Understands significance and can perform quality control procedures accurately	
Possesses technical skills of an entry level technologist	

## Affiliate Supervisor Final Evaluation of the Student (Part 2/3)

### *Professional Behaviors*

<b><i>Attendance and Dependability – Check 1</i></b>	<b>Points</b>
Arrives on time, begins work promptly, and completes scheduled days.	20 ( )
On occasion is tardy to work, leaves early, takes extended breaks, is absent from work.	15 ( )
Frequently is tardy to work, leaves early, takes extended breaks, is absent from work.	10 ( )
Consistently is tardy to work, leaves early, takes extended breaks, is absent from work.	5 ( )
Never arrives on time, always leaves early, takes extended breaks, is absent from work.	0 ( )
<b><i>Initiative - Check 1</i></b>	
Assumes responsibility for work and assignments without being reminded.	20 ( )
Usually assumes responsibility for work and assignments.	15 ( )
Occasionally assumes responsibility for work and assignments.	10 ( )
Rarely assumes responsibility for work and assignments.	5 ( )
Never assumes responsibility for work and assignments.	0 ( )
<b><i>Judgment and Decision Making - Check 1</i></b>	
Consistently asks appropriate questions recognizing limitations with professional maturity.	20 ( )
Usually displays good judgment and decision making.	15 ( )
Occasionally displays good judgment and decision making.	10 ( )
Shows poor judgment and decision making ability.	5 ( )
Lacks all professional maturity.	0 ( )
<b><i>Integrity - Check 1</i></b>	
Always admits mistakes, takes immediate and appropriate action to correct them.	20 ( )
Usually admits mistakes, takes immediate/appropriate action to correct them.	15 ( )
Occasionally admits mistakes, takes immediate/appropriate action to correct them.	10 ( )
Recognizes mistakes, but does not admit them, blames others or rationalizes.	5 ( )
Ignores and/or covers up mistakes, blames others, rationalizes.	0 ( )
<b><i>Professional Relationships and Cooperation - Check 1</i></b>	
Exhibits a tactful, professional manner in interaction with instructors and peers.	20 ( )
Usually interacts with others in a professional manner.	15 ( )
Occasionally interacts in a professional manner.	10 ( )
Is frequently unpleasant in interactions, and/or intolerant of others.	5 ( )
Behaves in an irritating, disrespectful, argumentative manner towards others.	0 ( )

**TOTAL** \_\_\_\_\_

### Affiliate Supervisor Final Evaluation of the Student (Part 3/3)

#### Summary Comments

Please comment on any weaknesses of the student or areas needing improvement. These comments will help the student identify areas that they are good in and the areas in which more work is needed. These comments are to be viewed as helpful so that the student has a general idea as to which skills are acceptable and which skills they will need to improve. Also, please comment on any areas of strength, which the student exhibits.

#### Areas needing improvement:

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#### Areas of Strength:

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The clinical instructor is encouraged to review the evaluation with the student. If there are concerns with the evaluation, please contact the Santa Fe College Clinical Internship Coordinator to help you resolve issues dealing with the student evaluation.

Evaluator: \_\_\_\_\_

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

Student (optional) \_\_\_\_\_

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

***Student: This document becomes a part of your permanent file. Your signature verifies that you have read this document and does not indicate that you are in agreement.***