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MINISTRY INTERNSHIP - SUPERVISOR EVALUATION FORM

This form should be submitted: 1] to the Internship Coordinator at the above address, or 2] online with the link at the end of the form (requires Acrobat Reader 8)

1 MINISTRY OBJECTIVE *Please refer to the stated objectives in the Training Contract. Comment on the Intern's ability to responsibly work towards the stated objectives, and the extent to which the ministry objectives were achieved.*

A.

B.

C.

2 MINISTRY RESPONSIBILITIES *Please refer to the stated objectives in the Training Contract. Comment on the extent to which the Intern successfully fulfilled his/her responsibilities, stating clearly the intern's strengths and weaknesses, and propose recommendations for improvement or enhancement.*

A.

B.

C.

D.

E.

3 ADDITIONAL COMMENTS


4 SUPERVISOR EVALUATION

Please check one:

PASS

FAIL

Upon completion of the internship:
The Supervisor will fill out this **Supervisor Evaluation Form**. The Layperson observer will fill out a **Layperson Evaluation Form**.
The Intern will fill out an **Intern's Comments Form**. All three of these forms will be submitted to the Internship Coordinator.

If submitting this form online, insert names in place of signatures below and check this box:
 By checking this box, I attest that the information provided herein is, to the best of my knowledge,
 complete and accurate; I have discussed this evaluation and these comments with the Intern. 

Signature of Supervisor

Signature of Intern

Date	MM/DD/YY
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 Webmail users: Save this completed form on your computer and email to inquiry@tbs.edu
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