#### FEEDBACK FROM THE HOST ORGANISATION’S SUPERVISOR ON A STUDENT WHO HAS COMPLETED A COMPULSORY PROFESSIONAL INTERNSHIP

*Dear Supervisor of the internship,*

*We are thankful to your organisation and you for the opportunity offered to the student to complete the compulsory professional internship and gain professional experience.*

*Your observations, insights and evaluations will be most valuable in improving the process of organizing compulsory professional internship. Therefore, please, choose between yes or no in the table below and comment on the competence of the student who has completed the compulsory internship at your in organisation. If an individual skill or ability cannot be assessed, please, do not write anything.*

*Administration of VU Faculty of Economics and Business Administration*

*and the student’s Study Programme Committee*

**Student’s name, surname** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of the host organisation** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Period of compulsory professional internship (date from ... to)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Student’s knowledge, skills and abilities** | **Yes** | **No** | **Don’t know** |
| The student demonstrated excellent analytical skills |  |  |  |
| During the internship the student was active, showed initiative and was involved in the activities of the host organisation |  |  |  |
| The student responsibly and dutifully performed the tasks assigned to him / her |  |  |  |
| The student was able to independently perform the tasks assigned to him / her and make decisions |  |  |  |
| The student was able to work in a team |  |  |  |
| The student was able to plan his / her activities |  |  |  |
| The student demonstrated good communication skills |  |  |  |
| The student's knowledge and skills improved during the internship |  |  |  |
| Other skills useful for the future career (please, specify) |  |  |  |
| **Overall assessment of the internship and comments** | | | |
| **Your suggestions for the improvement of the organisation process of compulsory professional internship administered by VU FEBA** | | | |

Professional internship supervisor at the host organisation

Position, name, surname, signature

Date