WESTERN MICHIGAN UNIVERSITY DEPARTMENT OF HEALTH, PHYSICAL EDUCATION & RECREATION HPHE 4990 – RECREATION/SPORT MANAGEMENT INTERNSHIP

MID-SESSION SELF-EVALUATION OF INTERNSHIP BY STUDENT INTERN

To be completed by the student upon completion of one-half (approx. 300 hrs.) of the internship.

INTERN			
AGENCY			
DA	DATE		
1.	Briefly summarize to date your exposure to the agency's goals/objectives and practices.		
2.	Is this experience what you expected? Please explain:		
3.	Explain how this experience is (is not) helping you gain your expected goals from field training.		
4.	Is the supervision (both University and Agency) you are getting adequate?		

Please explain:

5.	How can the field work experiences be more meaningful? a) What can you do to make it so?
	b) What can the agency do to make it so?
6.	What experiences would you like to see be given more emphasis during the remainder of your time with this agency?
REMEMBER: Candid discussions with the Agency Supervisor of your reactions expressed on this form is one step you can take to make your experience more meaningful.	
5/1	6