**Review of the Student’s Internship Work**

The Internship host organization name: \_\_\_\_\_\_\_\_\_\_\_\_

The Internship Supervisor’s name: \_\_\_\_\_\_\_\_\_\_\_\_

Full name of the student: \_\_\_\_\_\_\_\_\_\_\_\_

*The Internship Supervisor gives an assessment of the Student Internship/ practical activity, his or her knowledge and skills, the ability to work independently, describes and assesses the activities performed by the student. The evaluation form includes conclusions and gives the recommendations based on the results of the practice*

March, \_\_\_\_\_\_\_\_\_\_ 2018 .

The Internship Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

(Full name) ls

(Position at the host organization)

Email

Phone number: