University at Albany School of Public Health

Mentor’s Evaluation of MPH Internship/MS Field Placement

This form must be completed by the Internship Mentor and signed by the student and the student’s faculty advisor. Completed forms must be submitted to the Dean’s Office. **All students should also submit a copy of this form to their department**

Student Name_______________________________________ Phone _______________

Degree Program:  MS ☐  MPH ☐  PhD ☐  DrPH ☐  MD/MPH ☐

Title of Project: ______________________________________

Semester of Placement_____ Year_____ For Credit: Y ☐  N ☐  Number of Credits_____

Mentor’s Name_______________________________________

Please rate the student’s performance in the following areas

Rating Scale:

N/A  Not applicable or not observed.
This rating should be used when the activity in question is not part of internship expectations or the opportunity to observe this item has not occurred.

1  Poor.
Fails to meet expectations. Consistently performs poorly and needs significant improvement.

2  Below Standard.
Performance is below average. An intern whose performance consistently falls in this range requires improvement to function effectively as a professional in the field of public health.

3  Satisfactory.
Most interns will possess skills and judgment sufficient to meet professional demands in the field of public health. Performance in this range meets normal expectations.

4  Above Standard.
Performance and judgment is decidedly better than average. Shows sensitivity, judgment, and skill beyond what is expected or normally displayed by peers.

5  Outstanding.
Performance is recognizably and decidedly better than expectations.
Note: Please provide comments for ratings of 1 or 2.

PERFORMANCE

1. Accomplishment of Assignments
   a. Has acquired appropriate knowledge.
   b. Has acquired appropriate skills.
   c. Quality and accuracy of work.
   d. Work proceeds in orderly, organized fashion.
      Comments:

2. Reliability and Initiative
   a. Works effectively with minimal supervision.
   b. Initiates appropriate actions and follows through to completion.
   c. Uses time efficiently.
      Comments:

3. Communication Skills
   a. Comprehension of oral and written instructions.
   b. Communicates information orally with clarity and tact.
   c. Written communication is complete, concise and accurate.
      Comments:
4. **Interpersonal Relations**

   a. Accepts direction from supervisor.
   b. Accepts and applies constructive criticism of performance.
   c. Ability to work well with others.

   Comments:

5. **Public Health Knowledge and Commitment**

   a. Overall quality of internship project.
   b. Understanding of project’s relevance to public health.
   c. Understanding of organization’s role in the larger public health community.
   d. Commitment to field of public health.

   Comments:

6. **Achievement of the Discipline-specific and Interdisciplinary/Cross-cutting Competencies** (for MPH students only)

   Please comment on the student’s attainment of the competencies established for this internship:

7. **Final Report & Presentation:**
Oral Presentation: If your student is completing the oral presentation requirement within your organization, please attach your completed evaluation form for the student presentation component of the internship which is posted on Moodle.

Final Internship Report: Please provide any additional feedback on the student’s written final report:

7. Overall Final Grade for this internship/field placement:

Grade (Pass/Fail):
Comments:

RECOMMENDATIONS

1. For Student
   a. Professional Strengths:

   b. Recommendations for continued professional growth:

2. For Internship/Field Placement Experience
   a. Do you have recommendations for improving the internship/field placement program?
b. Are you willing to continue sponsoring future students?
   Yes ☐  No ☐
   Comment:

   c. Do you have other possible student assignments in your organization?
   Yes ☐  No ☐
   Comments:

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SIGNATURES

Student: ________________________________ Date __________

Mentor: ________________________________ Date __________

Faculty Advisor: __________________________ Date __________

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Please submit completed forms to: Katrina Chamberlain, Director, Internships and Career Services,
Room 117, Student Affairs Office
Email: kchamberlain@albany.edu
Phone: 518.402.0404
Fax: 518.402.0329