Additional Comments:

will be hand-delivered. The evaluation, it must be in a sealed and signed (over the seal) envelope.
(650) 725-5451 or L.D. mailed (mail code 2360) to the attention of the Career or Seminar/Forwarded to cecilia@stanford.edu. If the student
Please use the space below for any additional information about the student's performance considered relevant. This form can be faxed to

Date
Print Name
Signature
Internship Supervisor:

satisfactorily completed by the student.
To the Internship Supervisor: Please confirm by signing below that the internship of a minimum of 120 hours under your supervision has been

INTERNERSHIP NAME:

SUID#:

STUDENT NAME:

SUPERVISOR EVALUATION FORM
HUMAN BIOLOGY INTERNSHIP (HUMIBIO 197)