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**Bachelor Degree Internship Program  
FACULTY SITE VISITATION GUIDELINE**

Name: \_\_\_\_\_ Date of Visit: \_\_\_\_\_

Internship Site: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

Internship Site Address: \_\_\_\_\_

Faculty Supervisor: \_\_\_\_\_

Average Number of Hours Worked Per Day: \_\_\_\_\_ Days Per Week: \_\_\_\_\_

Please answer the following by checking the appropriate box. Comments are appreciated on back.

	Yes	No
1. Were you able to visit in-depth with the intern and discuss his/her experiences?		
2. Does the intern seem satisfied with the "fit" of the internship to date?		
3. Is the intern gaining knowledge and growing professionally?		
4. Is the intern making progress with the activities and objectives listed in his/her Internship Learning Agreement (ILA)?		
5. Has the intern encountered any major problems with the internship? If yes, please comment:		
6. Did you have an opportunity to visit with the site supervisor and discuss the internship?		
7. Does the site supervisor seem satisfied?		
8. Is the site supervisor following the objectives from the ILA?		
9. Do you believe the site supervisor is concerned about the intern and the experience he/she is receiving?		
10. Do you believe the intern will complete the requirements listed in the ILA?		
11. Do you believe this will be a successful internship?		

Please answer in detail:

1. List any concerns you have about this internship, the intern, the site supervisor or the site.
2. Did you discuss altering the internship with the intern or the site supervisor? If so, how?
3. What assignments did you give the intern?
4. What have you observed at this site that may be a strong point or a negative feature?
5. What problems were you able to solve during your visit?
6. When will you be making another contact with the intern and the site supervisor?

General Comments (continue on back):