



**MERSİN UNIVERSITY  
SCHOOL OF TOURISM AND HOTEL MANAGEMENT**

**STUDENT'S INTERNSHIP/TRAINING EXPERIENCE/PERFORMANCE  
ASSESSMENT FORM**

**Dear, Sir or Madam**

***\* To make an accurate assessment of the student, official photocopies of employment certificate and payroll document must be submitted. Please complete this form and mail it to the following address:***

**Mersin University  
School of Tourism and Hotel Management  
33335 / Çiftikköy / MERSİN / TÜRKİYE**

**SECTION 1: INFORMATION RELATED TO THE STUDENT AND THE COMPANY**

**Student's name and surname** : \_\_\_\_\_

**Student's number** : \_\_\_\_\_

**Departments (s)he received training at:** \_\_\_\_\_

**Name of the company at which the student received training** : \_\_\_\_\_

**Hotel type and number of stars (if a hotel)** : \_\_\_\_\_

**Group or type of Travel Agency (if a travel agency)** : \_\_\_\_\_

**Class if a restaurant** : \_\_\_\_\_

**Company's Web Address** :www.\_\_\_\_\_

**Company's e-mail Address** : \_\_\_\_\_ @ \_\_\_\_\_

**Company's Address** : \_\_\_\_\_  
\_\_\_\_\_

**Telephone / Fax** : \_\_\_\_\_

**Name of the General Manager** : \_\_\_\_\_

**The Internship Starting / Ending Date** : \_\_\_\_ / \_\_\_\_ /20 - \_\_\_\_ / \_\_\_\_ /20

**Number of days in the internship** : ( )

Stamp of company  
Signature

## **SECTION II: EVALUATION OF TRAINING PERFORMANCE**

### **DEPARTMENT INFORMATION**

The department and the field in which student worked : \_\_\_\_\_

Duration of work (Week or Day) : \_\_\_\_\_

Position or Work title : \_\_\_\_\_

Duties&Responsibilities (if any given) : \_\_\_\_\_

#### **1. Would you consider working with this student in the future?**

Definetely yes  Probably yes  Neutral  Probably no  Definetely no

#### **2. Please state this student's strengths and weaknesses and write your advice and suggestions related his / her development.**

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## **SECTION III. PERFORMANCE EVALUATION**

***\*Please put a mark for each box which you think describes the student's performance / position best. ( X )***

<i>Criteria for the student</i>	<i>Perfect</i>	<i>Over the expectations</i>	<i>Meets the expectations</i>	<i>Below the expectations</i>	<i>Insufficient</i>
<i>Appearance</i>					
<i>Attendance/Punctuality</i>					
<i>Quality of work done</i>					
<i>Planning and Organizing skills</i>					
<i>Hygiene and Cleanliness</i>					
<i>Confidence and Loyalty</i>					
<i>Teamwork adaptability</i>					
<i>Customer Relations</i>					
<i>Taking responsibility</i>					
<i>Communication skills</i>					
<i>Analytical skills / Problem solving skills</i>					
<i>Leadership skills</i>					
<i>Learning ability and willingness to learn</i>					

***Title/Position***  
***Name Surname :***

*Stamp of company*  
*Signature/Date*