



T.C.
MERSİN ÜNİVERSİTESİ
FACULTY OF TOURISM
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
Faculty of Tourism
33335 / Çiftlikköy / 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



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**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?

Definitely yes Probably yes Neutral Probably no Definitely no

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

SECTION III. PERFORMANCE EVALUATION

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

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

Title / Position

Name Surname

Stamp of Company
Signature