

Intern Feedback Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

Think about the past two weeks of your internship. Focus on your learning and support, without naming coworkers or clients. Every question is optional.

1. How clear were your learning goals for this period?

- ☐ Not at all clear
- ☐ Slightly clear
- ☐ Moderately clear
- ☐ Very clear
- ☐ Extremely clear
- ☐ No goals were discussed

2. When you needed guidance, how easy was it to reach your supervisor?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Neither easy nor difficult
- ☐ Somewhat easy
- ☐ Very easy
- ☐ I did not need guidance

3. How useful was the feedback you received for improving your work?

- ☐ Not at all useful
- ☐ Slightly useful
- ☐ Moderately useful
- ☐ Very useful
- ☐ Extremely useful
- ☐ I received no feedback

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4. How often did your tasks give you a chance to practice something you wanted to learn?

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Always
- ☐ Not applicable

5. How comfortable did you feel asking for clarification?

- ☐ Very uncomfortable
- ☐ Somewhat uncomfortable
- ☐ Neither comfortable nor uncomfortable
- ☐ Somewhat comfortable
- ☐ Very comfortable
- ☐ Not applicable

6. What is one thing you learned or practiced during this period?

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7. What support would make the next two weeks more useful?
