

# Academic Internship Reference Check Form

Please fill out the following form regarding the internship candidate.

## Referee Information

Name

Position / Title

Organization

Email

Phone

## Candidate Information

Candidate Name

Relationship to Candidate

How long have you known the candidate?

## Evaluation

Criteria	Excellent	Good	Average	Poor	Not Observed
Work Ethic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teamwork	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Strengths and Skills

Areas for Development

Additional Comments

Do you recommend the candidate for the internship?