

## Internship Evaluation & Reporting

Thank you for taking the time to complete this form, this evaluation will be used to assess the student's participation in the internship program.

Supervisors, using the form below please evaluate the student who interned with your organization, institution, or business. You can fill out this form electronically or you can fill it manually but eventually it must be signed and stamped from the company's side.

Please note that part I & III should be completed by the intern, part II should be completed by the direct supervisor in the company.

### Part I. GENERAL INFORMATION - STUDENT'S INPUT

#### Student Info:

Student Name: Samir EL-Batal GUC Student ID No.: \_\_\_\_\_  
Faculty: \_\_\_\_\_ Major: \_\_\_\_\_  
Student Mobile No.: 011 251 6888

#### Internship Info:

Company Name: IBM  
Core Industry/Business: IT Country: Egypt  
Supervisor Name: \_\_\_\_\_ Supervisor Job Title: AI Manager  
Supervisor Tel. No.: \_\_\_\_\_ Supervisor Mobile No.: 010 1333 110  
Supervisor E-mail: hadeer@eg.ibm.com Training Department(s): Full stack & AI Dept  
Source of internships: (1) SCAD office (2) on my own (3) Referrals from GUC TA/Dr. (4) Recruitment website (5) others:  
Work Place: (1) Organization (2) Head Office (3) Branch (4) Factory (5) Site (6) Others:

### Part II. EVALUATION AND COMMENTS - DIRECT SUPERVISOR'S INPUT

Period of Internship (dd/mm/yyyy) (dd/mm/yyyy)  
From: 15/06/2024 To: 15/08/2024  
Internship nature (Enrollment Status)  
☐ Part time Please specify, no. of Days per week: \_\_\_\_\_ hours per day : \_\_\_\_\_  
☒ Full time Please specify, no. of Days per week: 5 hours per day : 8

#### Company Stamp



#### For SCAD internal use only

Serial no.	SCAD Comment	Academic Reviewer Comment	Academic Reviewer Signature
			<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected Reason of rejection:  Signature: