**EXTERNAL'S EVALUATION** **FORM**

(Strictly Confidential)

Intern’s Name: **Usman Hussnain** NTU Student’s ID: **21-NTU-CS-1284**

Organization’s Name & Branch:  **MVSol\_\_\_\_\_\_\_**

Supervisor’s Name:**\_Dr. Tahir\_\_\_**

Designation:  **HR Manager**\_\_\_\_\_\_\_\_\_\_\_

Starting date of Internship: **\_\_10 June 2024 \_\_** Ending date of Internship: **10 Sep 2024**  Official timing during the internship:**\_\_5PM to 12AM\_\_** No. of Absentees (If Any): **No**

1. Please evaluate the performance elements of the intern. Evaluate all factors indicated below by **ENCIRCLING** the appropriate number on the scale given below and by commenting where appropriate.

Rating System

1= Unsatisfactory 2= Needs Improvement 3= Satisfactory 4= Excellent 5= Outstanding

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Attributes** | **1** | **2** | **3** | **4** | **5** |
| Computer knowledge |  |  |  |  |  |
| Problem Analysis |  |  |  |  |  |
| Solution Design |  |  |  |  |  |
| Investigation |  |  |  |  |  |
| Modern Software Usage |  |  |  |  |  |
| Management |  |  |  |  |  |
| Communication |  |  |  |  |  |
| Individual and teamwork |  |  |  |  |  |
| Ethics |  |  |  |  |  |
| Life-Long learning |  |  |  |  |  |

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Strengths of the intern: **Excellent**

Areas of improvement (If any):

Keeping in view the intern’s overall performance during the internship program would you

like to offer him/her a job in your organization if a position becomes available?

YES

NO

Any remarks/suggestions: **No**

Supervisor’s (Signature): \_ Official Seal/Stamp

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_, Contact No(s): E-mail Address: \_\_\_\_\_\_\_\_\_\_

Thank you for your cooperation!