

**Escola Superior de Agricultura   
 “Luiz de Queiroz”  
 Universidade de São Paulo**

Please return a scanned signed copy of this form to:

**INTERNATIONAL RELATIONS OFFICE** - **ESALQ/USP** Susy Ramos  
  
e-mail: [international.esalq@usp.br](mailto:international.esalq@usp.br)

EVALUATION FORM

* General Information

* NAME OF THE STUDENT:
* LABORATORY

Address:

* TITLE OF THE RESEARCH PROJECT

Co-Master Name:  
Occupation:

**Working period of the student:**

**Total internship hours:**

* TITLE OF THE RESEARCH PROJECT

Co-Master Name:  
Occupation:

**Working period of the student:**

* TITLE OF THE RESEARCH PROJECT

Co-Master Name:  
Occupation:

**Working period of the student:**

* Student Evaluation

|  |  |  |  |
| --- | --- | --- | --- |
| Poor | Medium | Good | Excellent |

Abstraction capability \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Critical mind \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Behaviour in group, human relations \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Ability to communicate \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Practical aptitude, organizing his/her work \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Autonomy, initiative \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Punctuality, regularity \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

Overall assessment \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

**-How do you place this student with respect to your other students?**

Second half

First half

First quarter

* Report evaluation

-Did the student submit his/her draft to you? Yes \_\_\_ No\_\_\_

-If yes, what is your opinion of it?

* Specific comments

Date and Signature