Externship Final Evaluation

Please complete the following final evaluation for your Externship student.

1. Date

	MM	DD	YYYY
Date	/	/	

*2. Student Name

*3. Supervising Attorney

Name	
Title	
Telephone	
EMail	

*4. Law Firm or Organization

Name	
Address	
Address	
City, State, ZIP	

Please assess the student's values

*5. Rate the following

	Excellent	Very Good	Good	Poor	Very Poor	N/A
1.Act honestly and with integrity						
2.Show reliability and willingness to accept responsibility						
3.Strive to provide competent, high quality legal work						
4.Treat clients, lawyers, judges, and staff with respect						
5.Show diligence and ethic of hard work						
6.Demonstrate maturity, autonomy, and judgment						
7.Demonstrate self-motivation and passion						
8.Show self-confidence and earn others' confidence						
9.Commitment to continued professional growth and development						
10.Demonstrate tolerance, patience, and emphathy						
11.Commitment to critical self-reflection						
12.Commitment to personal growth and development						
13.Strive to promote justice, fairness, and morality						
14.Demonstrate creativity and innovation						

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***6. Describe the quality of the student's work during this externship**

	Excellent	Very Good	Good	Poor	Very Poor
Quality of work	◯	◯	◯	◯	◯

***7. How well is the student grasping the underlying priciples of his/her work**

	Excellent	Very Good	Good	Poor	Very Poor
Understanding underlying principles	◯	◯	◯	◯	◯

***8. The student has completed the required 140 hours for this semester**

◯ Yes ◯ No

9. Comments, concerns, or recommendations if any, do you have about this student