



EASTERN KENTUCKY UNIVERSITY
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PARALEGAL PROGRAMS

LAS 399 Intern Evaluation Form

Attorney: _____ Intern: _____
 Address: _____ Date of Internship:
 _____ ___ Fall ___ Spring ___ Summer 20___
 Phone: () _____

Please evaluate the intern by marking an (X) in the appropriate column. This questionnaire is confidential.

PERSONAL CONDUCT	Excellent	Good	Fair	Poor
Appearance (well groomed, neat)				
Attitude				
Ability to work with others				
Maturity				
Leadership (if applicable)				
Enthusiasm				
Professionalism				

WORK PERFORMANCE	Excellent	Good	Fair	Poor
Punctuality				
Resourcefulness				
Task completion time				
Thoroughness				
Assumption of responsibility				
Oral expression				
Writing expression				
Ethical awareness				
Legal research				

How well would this person perform the day-to-day duties of a professional paralegal?

Extremely well ____ Competently ____ Below Average ____ Poorly ____

(Please comment when an explanation would appear to be helpful.)

Is there any reason you feel this intern is not suited for the paralegal profession? (Character, ethics, lack of adequate skills, etc. Please be specific.)

Please make any additional comments you feel appropriate about the performance of this intern or the ECU Paralegal Program.

Signature: _____

Date: _____

Please return to:

Director of Paralegal Programs
McCreary 113
Eastern Kentucky University
521 Lancaster Ave
Richmond, KY 40475-3122