



Department of Urban Planning

Internship Questionnaire

This form is to be filled out **by the student intern**. Return it to the department office when complete or email to crhine@bsu.edu

Your Name: _____

Agency: _____

Supervisor: _____ Title: _____

Describe your work responsibilities and the problems or tasks you found most interesting.

What did you learn about planning—and about yourself—from this experience?

How has it changed and/or helped you define your educational and career objectives? How different are your professional, academic, and personal goals now?

Based on the internship and your education to date, how would you appraise your own strengths and weakness? How will you work to improve weaknesses?

Looking back at your internship experience, how could you have performed better?

Describe how well the agency was prepared to work with an intern.

Would you recommend this agency to other students? yes _____ maybe _____ no _____