

FINAL SUMMARY FOR RETURNING INTERNS

CEDARVILLE UNIVERSITY
CEDARVILLE, OHIO

Name _____

Date _____

Organization or person you worked for and the dates employed:

Where was your internship located? _____

List your job title and a brief description of your job responsibilities:

What living arrangements did you have (e.g., rental costs)? _____

Did you visit any other colleges, museums, libraries, historical sites, attend cultural events, etc?

Did you write or assist with any papers or reports while on your internship?

Did your internship have any effects on your future academic or career plans?

What were the three most valuable lessons or experiences about your total internship?

What were the weakest points you discovered in the internship experience? What did you do to correct or change these?

What kinds of things happened to you that may enhance your role as an accounting, economics, management, management information systems, or marketing major?

Please comment on the relationship that your total internship experience may have to the on-campus classroom work you experienced.

Please list any ideas you may have on how the internship program could have been improved by:

Your Employer:

Your Internship Coordinator

Your Cooperating Faculty Member

Yourself
