INTERN OBSERVATION #1
Horticulture & Crop Science Student Internship Program
The Ohio State University, Columbus OH 43210

Student’s Name: _______________________________ Phone: __________________
Address during internship: _______________________________________________________
Company Name: __________________________________________________________________
Employer’s Name/email: _______________________________ Date: __________________

1. What are your impressions about your internship in general?

2. What jobs have you been performing for your employer?

3. What have you learned about yourself while working here?

4. What have you learned about the people with whom you are working?

5. What have you learned about the industry while working there?

6. What are you doing to reinforce a positive work attitude?

7. What have you been doing in the following areas?
   A. Customer Relations:
   
   B. Agronomic or Horticultural Skills/Practices (including production/growing):

   C. Plant Identification:

   D. Management:

8. Does your employer communicate regularly with you?
9. What are the strengths and weaknesses of your supervisor?

10. Do you have any suggestions for your employer as to how to improve the internship program?

11. Do you have any complaints or comments about the training you received while interning?

12. How would you rate this company/business as an internship training location?

13. If you had it to do over again, would you select this company?

14. Would you recommend sending another student to this location in the future?

15. Overall, how have you been accepted by other company employees?

16. How were you, as an internship student, accepted by the company?

17. How important do you feel occupational internships to be toward your “total” education?

18. Have you been able to work towards your objectives? Is there one you would change?