



istom

GENERAL ASSESSMENT FORM

AGRICULTURAL Internship – 1st period

*This form is to be completed at the end of the first internship period:
Farm discovery and immersion.*

INTERN

Last name:

First name:

INTERNSHIP SUPERVISOR

Last name:

First name:

Position:

SKILLS ASSESSMENT

Unsatisfactory	Fair	Satisfactory	Very satisfactory	COMMENTS (optional)
----------------	------	--------------	-------------------	------------------------

PROFESSIONAL DIMENSION

Punctuality and attendance	☐	☐	☐	☐
Compliance with instructions and safety rules Appropriate workwear (suitable footwear, rainwear, etc.)	☐	☐	☐	☐
Motivation and involvement in assigned tasks	☐	☐	☐	☐
Participation in farm activities	☐	☐	☐	☐
Curiosity and interest in learning how the farm operates	☐	☐	☐	☐
Quality of communication with the internship supervisor and/or team	☐	☐	☐	☐
Ability to organize their work	☐	☐	☐	☐

PERSONAL DIMENSION

Integration into the farm	☐	☐	☐	☐
Quality of relationships with the internship supervisor and/or team	☐	☐	☐	☐
Professional attitude (respect, politeness, behaviour, reliability, etc.)	☐	☐	☐	☐
Adaptability to the pace and working conditions	☐	☐	☐	☐

To prepare for their return to the farm, what would you advise them to do?

Did the intern meet your expectations?

- ☐ Exceeded expectations ☐ Met expectations
☐ Partially met expectations ☐ No

STRENGTHS

AREAS FOR IMPROVEMENT

Date

Internship Supervisor's Signature

To sign, use the "Fill & Sign" function in your PDF reader.

Document to be returned to:

Internship Office

4 rue Joseph Lakanal 49000 Angers
stages@istom.fr

➡ PTO – Additional comments on the reverse (optional)



ADDITIONAL COMMENTS (OPTIONAL)

Please use this space if you would like to provide further details about any of the skills assessed or share any useful comments regarding the internship and the student's skills

PROFESSIONAL DIMENSION

PERSONAL DIMENSION

OTHER COMMENTS