

Placentia-Yorba Linda Unified School District  
**Val Tech Internship Verification Form**  
 (Evaluation # 2: 51 to 100 hours evaluation)



Student: \_\_\_\_\_ Class of \_\_\_\_\_

Organization: \_\_\_\_\_ Number of hours: \_\_\_\_\_

Intern's Contact \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Address: \_\_\_\_\_

Email address: \_\_\_\_\_ (City State Zip)

Evaluation	Satisfactory			Unsatisfactory			Comments
Punctuality	5	4	3	2	1	0	
Quality of work	5	4	3	2	1	0	
Attention to detail	5	4	3	2	1	0	
Attitude	5	4	3	2	1	0	
Effort	5	4	3	2	1	0	
Attire	5	4	3	2	1	0	

Describe the activities and tasks involving technology that you want the Val Tech intern to undertake in the next 50 hours. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Please return completed form to the Val Tech Coordinator.