**OBSERVATION SHEET**

Name and surname of the internship student: .......................................................................

Name and surname of the internship tutor: ..........................................................................

Name of the internship partner / organization: ......................................................................

Name and surname of the coordinating professor: ...............................................................

The student’s behavior and integration in the activity of the organization are to be assessed with one of the following evaluation ratings:

FB (very good); B (good); S (satisfactory); N (unsatisfactory)

|  |  |
| --- | --- |
| **Criteria** | **Evaluation rating** |
| 1. **Discipline** *(the extent to which the internship student followed the tutor’s instructions and demonstrated discipline during the internship stage)*
 |  |
| 1. **Punctuality** *(the extent to which the internship student complied with the practice schedule agreed with the tutor and proved to be punctual at the company’s premises)*
 |  |
| 1. **Responsibility in solving the tasks** *(the extent to which the internship student performed the activities assigned by the tutor during the internship, proved responsibility in solving the tasks)*
 |  |
| 1. **Compliance with the company’s internal regulations** *(the extent to which the internship student showed appropriate conduct, complied with the internal regulations of the internship partner)*
 |  |
| 1. **Gained competencies through involvement in the activities performed during the internship** *(the extent to which the internship student has acquired competencies as a result of the activities carried out under the guidance of the tutor)*
 |  |

Date

Name and surname of the tutor

Signature

**EVALUATION REPORT**

.................................................................................. (name of the tutor), having the position ........................................ within .................................................... (name of organization) having the headquarters in ................................., .............. no., ...................................................... street, .......... building, ........ floor, .......... apartment, ............................... county/sector, telephone ............................................., email .............................................................................., the tutor of ............................................................................... (name of the internship student), enrolled at the Bucharest University of Economic Studies, Faculty of Marketing, in the .......... year of study, the education form .............. (IF/IFR/ID), group number .............., I evaluate the above-mentioned student for her/his performance during the internship with one of the following evaluation ratings:

FB (very good); B (good); S (satisfactory); N (unsatisfactory)

|  |  |
| --- | --- |
| **Final evaluation** | **Rating** |
| Gained practical knowledge in the field of marketing |  |
| Discipline demonstrated during the internship  |  |
| **Global evaluation of the internship completed by the student** |  |

Other observations and remarks regarding the student’s activity *(optional)*:

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Date

Name and surname of the tutor

Signature

**CERTIFICATE OF COMPLETION OF THE INTERNSHIP**

................................................................. (name of the organization), as internship partner, it hereby confirms that ............................................................................... (name and surname of the internship student), student at the Bucharest University of Economic Studies, Faculty of Marketing, has completed an internship within the organization during the academic year 2024-2025, totaling **112 hours** of practical training.

 Date

Name and surname of the representative / tutor

Signature