

# Firefighter's ABCs Internship Task

www.firefightersabcs.com

Intern Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Telephone: ( ) \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_  
Date of task: \_\_\_\_\_ Title of task: \_\_\_\_\_  
Site name or N/A: \_\_\_\_\_ Hours spent on task: \_\_\_\_\_

Overview of task: add additional pages as needed:

---

---

---

---

---

---

## TO BE COMPLETED BY SITE SUPERVISOR:

First: \_\_\_\_\_ Last: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone: ( ) \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

- 1. Needs Special Attention**
  - Does not demonstrate this skill/behavior
- 2. Needs Improvement**
  - Occasionally demonstrates this skill/behavior
- 3. In Development**
  - Requires additional development and experience
- 4. Effective**
  - Consistently meets full requirements
- 5. Commendable**
  - Performance consistently goes beyond expectations
- 6. Exceptional**
  - Consistently exceptional in all areas
- 7. N/A Does not apply**

Comments:

---

---

---

Signature of Intern: \_\_\_\_\_

Signature of site supervisor: \_\_\_\_\_

Intern shall:

Email form to: *info@FirefightersABCs.com*