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Youth Name: \_\_\_\_\_

What did you like best about your internship?

What did you like least about your internship?

Do you feel like you were given the information, tools, and support you needed to succeed?

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What information, tools, or support did you find most useful?

What information, tools, or support do you wish you received but did not?

What suggestions do you have for the organization? How could we improve?

Notes: