

MONTANA STATE UNIVERSITY DIETETIC
EVALUATION PROGRAM

Dietetic Student Non-internship Evaluation Form - Electronic Format

Student name: _____

Graduation Date: _____

Today's Date: _____

Current address: _____

e-mail Address: _____

Would you like to receive a MSU Alumni Dietetic Program newsletter?

1.0 Are you currently working in the field of nutrition? If yes, please describe the field. If no, please describe the field you are in.

Type Here:

2.0 How has your education in the dietetic program at MSU helped you in the field you are working in?

Type Here:

3.0 Do you have plans to pursue a dietetic internship? Or further education (i.e. additional BS, MS, PhD)?

Type Here:

4.0 From your current perspective, what do you feel were the strengths of the MSU Dietetics Program?

Type Here:

5.0 What do you feel were the areas needing improvement?

Type Here:

THANK YOU FOR YOUR ASSISTANCE
**PLEASE RETURN THIS FORM AT YOUR EARLIEST CONVENIENCE (e-mail to harmon@montana.edu)