

Work Experience Check In

To be completed by the Faculty and Employer during the work experience

This form is intended to guide conversations during site visits and check-ins between the Faculty and the Employer.

STUDENT INFORMATION	
Student Name:	Employer:
Student ID:	_Supervisor:
Program:	_ Supervisor Phone:
Campus:	Faculty Advisor:

VISITATION/CHECK-IN DETAILS			
Date: (month/dd/yyyy)			
Interview Conducted:	□ with the student and supervisor so	eparately	
	with the student present during the visitation		
Visit:	□ On-site □ by phone □ Oth	er:	
RELATIONS WITH OTHERS	JUDGEMENT	OVERALL WORK PERFORMANCE	

RELATIONS WITH OTHERS

- □ Works well with others
- Gets along satisfactorily
- □ Some difficulty
- Works poorly with others

DEPENDABILITY

- □ Completely dependable
- □ Satisfactory
- □ Sometimes neglectful or careless
- □ Unreliable

ABILITY TO LEARN

- □ Exceptional.
- Very good, except _____
- □ Satisfactory, but
- Below average, should
- □ Very slow

ATTITUDE – APPLICATION TO WORK

- Very interested and industrious
- □ Satisfactory in diligence and interest
- Somewhat indifferent
- Definitely not interested

- Exceptionally good
- □ Above average in making decisions
- □ Usually makes the right decision
- □ Often uses poor judgement

INTEREST & ENTHUSIASM

- Above average interest and enthusiasm
- □ Satisfactory amount of interest and enthusiasm
- □ Somewhat indifferent
- Definitely no interest or

enhusiasm

ATTENDANCE

- □ Regular
- □ Irregular

PUNCTUALITY

- □ Regular
- □ Irregular

OVERALL WORK PERFORMANCE

- □ Outstanding
- □ Very Good
- □ Average
- Marginal
- □ Unsatisfactory

STUDENT NEEDS TO IMPROVE ON (Please check all that apply)

- Human Relations
- Accepting constructive criticism
- Following orders/directions
- □ Use of telephone
- Quantity of work
- □ Ability to communicate (written-spoken)
- Mathematics ability
- Quality of work
- Operating equipment
- □ Other

SIGNATURE			
Faculty	Signature	Date	