

3. General Performance: *Please provide details if assigning a grade 1 or 2.*

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Comments:

4. Additional Comments:

Comments:

Work Experience Placement Representative Name:

Signature:

Date:

Thank you for taking the time to complete this form. If you would like to provide further feedback, please email XXXXXXXXXXXXXXX at XXXXXXX@oxfordinternational, or call us at 604-688-7942.