

Work Experience Supervisor Evaluation Form (End of Placement)

This evaluation is designed to provide feedback on work placement performance and related issues to assist the student’s future develop and performance. This form is to be completed at the end of the Work Experience Placement.

Supervisor Information						
Name:			Job Title:			
Organisation Name:			Phone Number:			
Email:			Website:			
Student Information						
Name:			Placement Title:			
Placement Start Date:			Placement End Date:			
Student Evaluation						
Please evaluate the student in the following areas by ticking the appropriate rating:	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory	Non Applicable
Attendance/punctuality						
Professionalism						
Ability to follow instructions						
Ability to work independently						
Ability to work with others						
Problem-solving						
Interaction with clients						
Interaction with colleagues						
Oral communication						
Written communication						
Ability to work with internal systems/computer skills						
Willingness to help others						
Quality of work						
General Enthusiam throughout placement						

Describe the overall strengths demonstrated by the student during placement:

Outline the areas in which further improvement are required:

Describe the ways in which the student's performance has benefited the organisation during their placement:

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Overall, how would you describe the experience with this student:

Excellent	Good	Satisfactory	Poor

Supervisor Signature:	Date:
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