**CAREER CENTRE HASKAYNE SCHOOL OF BUSINESS**

**Co-operative Education/Internship Program**

Telephone: 403-220-7533

**Co-op Placement Evaluation Form**

Please complete this evaluation and submit through the D2L Dropbox

Student Name

Concentration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer Department/Division Location Position Title

Semester: Winter Spring Fall (Circle one)

Year: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Work Term: 1 2 3 4 (circle one)

Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is very important that you evaluate your experience honestly, including both positive and negative impressions. Your responses will be regarded as confidential and will help us determine whether changes need to be made for subsequent work assignments.

1. What is your overall rating of this work term?
	* Excellent
	* Very Good
	* Good
	* Marginal
	* Unsatisfactory
2. How relevant was it to your academic major/career?
3. Would you recommend this as a future work term? Please explain why or why not.

Over…………

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1. Could the work term have been improved and if so, how?
2. Was the salary fair based on the industry sector, your experience and academic level?

 Hourly/monthly rate**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* + Position paid well
	+ Salary was adequate
	+ Position was underpaid
1. Describe your work environment (physical space, work station).
2. How supportive were your co-workers?
	* Open, friendly and supportive
	* Polite
	* Unfriendly, closed group
3. Your supervisor:
	* Encouraged questions, was helpful, provided feedback
	* Was somewhat helpful, but too busy
	* Discouraged questions
4. How would you rate your technical skills for this position?
	* Exceeded skills needed for the position from the start
	* Skills were adequate
	* Needed more training in
	* In over my head
5. What did you enjoy most about your work term?

Student Signature Date