

Work Experience Evaluation Form

Student's Name:	School:			
Organisation:	Supervisor:			
Areas of Organisation:	Dates:			
Work skills – <i>How well did the learner perform in the following areas:</i> <i>1 - over and over what was required 2 - Competent 3 - Room for improvement in some areas 4 - Needs to improve in many areas</i>				
Activity	1	2	3	4
Timekeeping (attendance and punctuality)				
Dress code (appearance and cleanliness)				
Manner of communicating with people				
General Conduct				
Use of IT				
Ability to collect and record data				
Discussion eg questions asked				
Recognising need to act responsibly (self/others)				
Exercise judgement/common sense in taking decisions				
Using Initiative in work environment				
Taking directions/working co-operatively with those in authority				
Sustain and complete tasks set				
Working co-operatively with others				
Demonstrating commitment to learn and try new things				
Demonstrating positive attitude towards a challenge				
Demonstrating honesty				
Managing conflict in the workplace appropriately				
Leaving personal issues outside the workplace				
Demonstrating enthusiasm and enjoyment				
Any skills acquired:				
Other comments:				

Signed (Work placement supervisor) **Date**

Signed (Trainee) **Date**