Co-operative Education
Student Evaluation Form

Full Name: ___________________________  Today’s Date: ___________________________
Current Year Level: ___________________  Concentrations: ________________________
Organization/Company: ___________________  Working Department: ___________________
Student Job Title: _____________________  Supervisor Name: __________________________

The purpose of this Evaluation Form is for you to provide honest feedback about the quality of your Co-op, your supervisor, and how this Co-op contributed to your personal and professional development.

Please rate the following statements about your Co-op on the following scale:

Strongly Agree (5) – Agree (4) – Neutral (3) – Disagree (2) - Strongly Disagree (1) – Not applicable (N/A)
Feel free to comment.

As a result of my Co-op, I have a better understanding of concepts and theories that I study in courses.

5 4 3 2 1 N/A
Comment: __________________________________________________________________________

The responsibilities I was given were mostly challenging and meaningful.

5 4 3 2 1 N/A
Comment: __________________________________________________________________________

My supervisor was accessible and available to me.

5 4 3 2 1 N/A
Comment: __________________________________________________________________________

I was given some on the job training and instruction.

5 4 3 2 1 N/A
Comment: __________________________________________________________________________

The work experience related well to my area of study.

5 4 3 2 1 N/A
Comment: __________________________________________________________________________
This Co-op gave me the opportunity to develop:

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<tr>
<th>Skill</th>
<th>5</th>
<th>4</th>
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<tbody>
<tr>
<td>Interpersonal relationship skills</td>
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<td>Professional communication and presentation skills</td>
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<td>Writing skills</td>
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<td>Technical skills</td>
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Specify which:________________________________________________________________________________________________________________________

I feel better prepared to enter the world of work after this experience.

5 4 3 2 1 N/A

Comment:________________________________________________________________________________________________________________________

Is this your first work experience?

Yes / No

What courses taken prior to your Co-op experience were the most helpful to you in this position and why?

________________________________________________________________________________________________________________________

How did this work experience contribute to your Career exploration and plans?

________________________________________________________________________________________________________________________

Overall how would you rate this Co-op? (Tick one of the following)

- [ ] Excellent professional learning experience
- [ ] Good professional learning experience
- [ ] Average professional learning experience
- [ ] Below average learning experience
- [ ] Poor learning experience

Would you recommend this Co-op to other students? Please explain why or why not.

________________________________________________________________________________________________________________________

Were you offered a full-time, part-time or permanent position with the organization where you did your Co-op?

Yes/No

Comment:___________________________________________________________________________________________________________