



STUDENT WORK-SITE REVIEW

STUDENT INFORMATION	
Name	Student B#
Term	Date
Course	Site Name
Were you employed at this location at the start of the internship/practicum/capstone?	Yes No
PERFORMANCE AREAS	
1 = Poor 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent	
Quality of on -site supervision	
Comment	
Technical skills were utilized and developed	
Comment	
Quality of direction from supervisor	
Comment	
Preparation for the real world of work	
Comment	
Overall quality of this experience	
Comment	
Would you recommend this location to another student? Explain:	Yes No
Verification of Student Worksite Review	
<div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 60%;">Signature: _____</div> <div style="width: 35%;">Date _____</div> </div>	