THIS REPORT IS DUE IN THE OFFICE OF COOPERATIVE EDUCATION AND CAREER SERVICES ON OR BEFORE:

CABRINI COLLEGE
STUDENT EVALUATION OF COOPERATIVE EDUCATION ASSIGNMENT

Name of Student (First-Middle-Last) **Credits Earned** **Major**

Employer: Department **Total Salary Earned** **Course No.**

Hourly Wage

Work Period (Semester) - Days, Hours Start/End date **Immediate Supervisor**

This evaluation will be important in determining the value of your work experience, both for yourself and for students on future Co-op assignments with the same employer. The evaluation should be honest, objective, and should indicate problems as well as your progress during the Co-op period. Please add your remarks on the second page so that your Coordinator may counsel with you and with the company/organization for which you worked. These comments help us to maintain and improve the program.

EDUCATIONAL VALUE OR MERIT OF ASSIGNMENT:
___ Exceptional opportunity
___ Worthwhile experience
___ Not a useful experience/might help some
___ Probably of no value (*please comment below)

DID I LIVE UP TO MY FULL POTENTIAL?:
___ Eagerly sought to gain maximum from experience
___ Usually tried to get the most from experience
___ Did not do anything extra
___ Did as little as possible

ATTITUDE TOWARD STUDENT BY SUPERVISOR/MGMT:
___ Encouraged spirit of inquiry/helpful
___ Willing, but did not go out of the way to help
___ Seemed to act like I was "in the way"
___ Actively rejected me/discouraging attitude
___ Does not apply (*please comment below)

MY WORK HABITS:
___ Looked for additional things to do
___ Checked work, on time, neat & accurate
___ Regular and punctual in attendance
___ Showed up for work

OPPORTUNITIES TO RELATE TO OTHER PERSONNEL:
___ Open, friendly & supportive atmosphere
___ Permitted but not encouraged
___ Generally unfriendly, closely knit groups

CO-OP JOB ORIENTATION BY EMPLOYER:
___ Complete and Accurate
___ Somewhat related
___ Had no meaning at all

SALARY PAID IN RELATION TO JOB REQUIREMENTS, EXPERIENCE, AND ACADEMIC TRAINING:
___ Comparable to full-time employees
___ Position was well paid
___ Definitely underpaid for service given
___ Not applicable

WAS YOUR SUPERVISOR AVAILABLE WHEN NEEDED?
___ Always available
___ Sometimes available
___ Rarely available
___ Never available

DID POSITION LIVE UP TO THE ORIGINAL DESCRIPTION?:
___ Closely matches description
___ Mostly matches the original description
___ Little relationship exists
___ No relationship exists (*Please comment below)

***COMMENTS:**_____

_____

_____

_____

SUPERVISOR WILLING/CAPABLE OF ANSWERING QUESTIONS:
_____Always helpful and informative
_____Sometimes informative and helpful
_____Unhelpful & uncommunicative
_____Passive/kept to him/herself

SUPERVISOR RECEPTIVE TO NEW IDEAS:
_____Implemented suggestions by employees
_____Considered ideas but did not implement
_____Paid "lip service" only to ideas
_____Did not want to hear ideas

RELATIONSHIP WITH YOUR SUPERVISOR:
_____Good
_____Fair
_____Needs Improvement

MY ATTITUDE:
_____Showed real enthusiasm & initiative
_____Willing to help when told to do something
_____Lacked interest and enthusiasm
_____Refused all but assigned duties & tasks

MY RELATIONSHIP WITH OTHER PERSONNEL:
_____Open, friendly, helpful & informative
_____Quiet and reserved
_____Generally unfriendly and unhelpful
_____Kept completely to myself

SUPERVISOR'S RELATIONSHIP WITH OTHER CO-OP'S:
_____Good
_____Fair
_____Needs Improvement
_____Not applicable

Please indicate the level of effectiveness of each of the following services of the co-op office (CIRCLE ONE NUMBER FOR EACH ITEM):

	Improvement Needed	Satisfactory	Effective	Very Effective
Provided me with a worthwhile study related work experience	1	2	3	4
Staff counseled and assisted me during the co-op job search	1	2	3	4
Staff assisted me in resume writing and interviewing	1	2	3	4
Co-op staff was helpful and available during my placement	1	2	3	4
Other (PLEASE SPECIFY) _____ _____ _____	1	2	3	4

Please rank the benefits of participating in the Cooperative Education Program. Rank you answers from 1 to 5. One (1) being the greatest benefit and five (5) of least benefit.

_____Earn a good salary
_____Gain self-confidence
_____Apply my coursework in on the job experience
_____Increase my chances of getting a good job after graduation/advancing
_____Develop professional skills

OVERALL PERFORMANCE OUTSTANDING ABOVE AVERAGE AVERAGE BELOW AVERAGE UNSATISFACTORY
(Check appropriate boxes)

The information on this form will be kept strictly confidential and will be used only by the Cooperative Education Program in evaluating your experience and the employer for whom you worked.

Student's Signature:_____Date:_____

Address:_____

_____

Telephone Number:_____ e-mail_____

Sophomore_____ Junior_____ Senior_____