

# Student Evaluation

Student: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

Program: \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_

Organization Name: \_\_\_\_\_

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Please answer the following questions. It is important that you give an honest evaluation of your experience. Your input is important and will help us monitor and continually improve the quality of the Cooperative Education Program. Thank you!

## **1. Internship Site Evaluation**

- a. How did you benefit from your work experience? Relate this to the outcomes of your learning objectives.
  
  
  
  
  
  
  
  
  
  
- b. Comment on the supervision from your employer.

## **2. Cooperative Education Program**

- a. Comment on the assistance you received from the Cooperative Education Office.
  
  
  
  
  
  
  
  
  
  
- b. Comment on the assistance you received from your Faculty Advisor.
  
  
  
  
  
  
  
  
  
  
- c. How did you benefit from the seminar portion of the course? (If applicable)
  
  
  
  
  
  
  
  
  
  
- d. Would you recommend Co-op to other students?     Yes     No
  
  
  
  
  
  
  
  
  
  
- e. Check the three most important benefits of your Cooperative Education experience:

<input type="checkbox"/> Practical work experience for resume.	<input type="checkbox"/> Made professional contacts for future job search.
<input type="checkbox"/> Chance to “test” career choices.	<input type="checkbox"/> Earned wages to offset college expenses.
<input type="checkbox"/> Opportunity to relate classroom learning to “real world.”	<input type="checkbox"/> Earned credit toward graduation requirements.
<input type="checkbox"/> Motivated learning in the classroom.	<input type="checkbox"/> Learned human relations skills in the workplace setting.
<input type="checkbox"/> Experience on sophisticated equipment not available at the college.	<input type="checkbox"/> Helped make classroom theory more relevant.
<input type="checkbox"/> Refined technical skills learned in the classroom, important in the workplace.	