

**STUDENT WORK PLACEMENT EVALUATION FORM**  
**(To be completed by the company/organization)**

**1. Related Information**

Student Name: .....

Company/ Organization: .....

Company/ Organization Contact Person: .....

Academic Representative Name: ..... Date: .....

**2. Work Description**

### 3. General Questions

Please mark a «√» where relevant:

**Yes**                      **A little/  
Maybe**                      **No**

The company/ organization has benefited from the work placement

--	--	--

Would you be interested in participating in our work placement scheme again?

--	--	--

### 4. Student Evaluation

Please mark a «√» on the relative value:

**0    10    20    30    40    50    60    70    80    90    100**

Compliance/ Familiarization with the company/ organization

--	--	--	--	--	--	--	--	--	--	--	--

Interest and Commitment

--	--	--	--	--	--	--	--	--	--	--	--

Student's approach towards team work (if relevant)

--	--	--	--	--	--	--	--	--	--	--	--

Communication in the work environment

--	--	--	--	--	--	--	--	--	--	--	--

Knowledge of techniques and skills

--	--	--	--	--	--	--	--	--	--	--	--

Design intelligence (if relevant)

--	--	--	--	--	--	--	--	--	--	--	--

Creative initiatives

--	--	--	--	--	--	--	--	--	--	--	--

Total (%)

--

**5. Further comments from the company/organization regarding the student's evaluation**

**6. Student's comments about their own work**

*Your evaluation and comments may be made known to the student in order to assist their progress*

Academic  
Representative  
Signature

Date

\_\_\_\_\_

\_\_\_\_\_