

FORM (9)

Field Supervisor Evaluation

a. Student Information:

Student's Name:

Student ID:

Specialization:

b. Field supervisor Information:

Company:

Name of the field supervisor:

Position:

Phone Number: Fax Number:

c. General Training Information:

1. Describe in detail the areas in which the student was trained? (Extra document can be added if necessary)

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2. Did the student have a specific job? (Yes / No) ... If yes, please specify the type of this work. (Extra document can be added if necessary)

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3. Your overall impression about student training:

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4. Did you have any comment(s) and/or suggestion(s) to improve the level of training? (Extra document can be added if necessary)

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d. Student Performance Evaluation:

Please choose the appropriate grade and place it in the corresponding box.

(Excellent = 5, Very Good = 4, Good = 3, Accepted = 2, Poor = 1)

1. Student attendance	
Please do not allow the student to continue training if he is absent for five days or more.	

2. Interest for training and enthusiasm for work	
3. Cooperation with others	
4. Productivity and quality of work assigned	
5. Theoretical information use	

Total score (Out of 25)

Company Stamp

I report to the training department at the College of Engineering - Al-Jouf University that I personally supervised the training of the student named above for the period from:

..... /...../ 144... to/...../ 144...

Signature of the Field Supervisor

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(The training department of the College of Engineering will not adopt this report if it is not stamped by the company)

Company Stamp