Work-Based Learning Site Visit

Student: _____

Employer: _____ Supervisor Name (please print) _____

Address: _____

Curriculum Program: _____

Course: WBL _____ Section _____ Fall _____ Spring _____ 20 _____

Faculty Coordinator Name: _____

Interview between employer and faculty coordinator

Rank the student's work performance using the scale at the right. *(If rated below average, please explain)*	NA	Below Average	Average	Very Good
Understanding of their assigned responsibilities Comments:				
Knowledge to competently perform their assigned responsibilities Comments:				
Ability to help meet the needs of your department Comments:				
Punctuality/Dependability Comments:				
Subject knowledge Comments:				
Quality of work Comments:				
Attitude towards work assignments Comments:				
Interaction with employees Comments:				
Overall job performance at this point of the WBL course Comments:				

Employer Comments:

_____

Supervisor Signature	**Date:**
Faculty Coordinator Signature	**Date:**

Interview between faculty coordinator and student

Answer the following questions.	Yes	No
Is your WBL employment position related to you program of study? Comments:		
Is your WBL work assignment consistent with the initial job description? Comments:		
Are you able to relate your WBL assignment to your class work? Comments:		
Are you challenged by your WBL work assignments? Comments:		
Have you been able to achieve your Measurable Learning Objective(s)? Comments:		
Does your employer provide adequate training and supervision so that you can achieve your career goals? Comments:		
Do you think this WBL assignment will help you meet some of your goals? Comments:		
Have you encountered any problems related to your Measurable Learning Objective(s)? *(If yes, please explain)* Comments:		

Rank the overall quality of your current WBL employment position *(If rated below average, please explain)* Comments:	Below Average	Average	Very Good

Faculty Comments:_____

_____

Faculty Coordinator Signature	Date:
Student Signature	**Date:**