

Student Final Co-op Evaluation

INSTRUCTIONS: Please complete this form and **save your results**. Once you have completed the form please e-mail it to Forestry and Conservation Co-op Coordinator tony.loring@ubc.ca or to the Wood Co-op Coordinator sudeh.jahan@ubc.ca. Return this form within two weeks of the completion of your work term. This evaluation form is required before a final grade can be assigned.

Student Name (first and last)

Student's Position

Start Date

End Date

Work Term

Employer

Division/Department

City

Province

Supervisor Name

Supervisor Title

Supervisor E-mail

Phone

Briefly describe your responsibilities / work performed:

Please rate the following components of your learning experience during this co-op work term:

	Very High	High	Good	Low	Very Low	N/A
Degree of challenge						
Amount of work required						
Amount of supervision received						
Job met my expectations						
Overall job satisfaction						
Critical thinking						
Problem solving						
Decision making						
Planning & organization						
Time management						
Written communication						
Verbal communication						
Interpersonal skills						
Team work						
Working independently						
Computer / technical						
Leadership						
Initiative						
Professionalism						
Enthusiasm						
Dependability						
Career relevance						
Academic relevance						

List the top 3 learning objectives you set at the beginning of the work term.

Rate your success in achieving your top 3 Learning Objectives.

	Very High	High	Good	Low	Very Low
Learning Objective #1					
Learning Objective #2					
Learning Objective #3					

What were the most valuable aspects of your co-op work term?

What were the least valuable aspects of your co-op work term and why?

What are your suggestions for improving this position?

How has this job changed or confirmed your career and/or academic goals?

Did you have to relocate for your work term? Yes No

If yes, please answer the following questions:

Did the company provide assistance in locating accommodation? Yes No

Did you have difficulty finding accommodation? Yes No

Did the company help you with relocation costs? Yes No

If yes, how? (Airfare? / Hotel? / Lump sum for relocation?)

ADDITIONAL COMMENTS

CO-OP ASSIGNMENT RELEASE

Please indicate what assignment you are submitting for this work term:

Poster Report Presentation

Assignment Title

I authorize the Co-op Office to allow other students, faculty, and staff to view this report upon their request to the Co-op Office.

WAIVER: From time to time, we use student comments about the Co-op Program in our promotional materials. Would you allow us to use your comments? Yes

Thank you for your feedback!

Your comments will aid in the continual improvement of the Co-op Program for students.

Date form was completed