

Student Self-Evaluation

Work-Based Learning – Unpaid Work Experience (Internship)

| Student Name: | School: | |
|-----------------------|---------|--|
| VR/VABIR Coord.: | | |
| Work Experience Site: | | |
| Supervisor: | | |

The following skills were identified at the beginning of your work experience. Please rate your progress with applying these skills during your unpaid work experience.

Transferable Skills

Mid-Way Assessment, Date _____

Final Assessment, Date

Performance Assessment Scale:

4 - Consistently and Independently, 3 - Frequently, 2 - Inconsistently and/or with Adult Support, 1 - Rarely

| Commitments: Maintains an acceptable attendance record, Reports on time, Informs supervisor of upcoming appointments, Uses appropriate dress, grooming and hygiene | Score Feedback: | Score Feedback: |
|---|--------------------|--------------------|
| Clear and Effective Communication: Uses appropriate language, Follows written and verbal instructions, Asks questions if Instructions are not understood, Shares information verbally and in writing | Score Feedback: | Score Feedback: |
| Self-Direction: Requests/Performs assignments without prompting, Shows initiative, Is motivated, Maintains a positive attitude, Accepts feedback | Score Feedback: | Score Feedback: |
| Creative and Practical Problem Solving: Is willing to learn new tasks, Completes ssigned tasks on time, Identifies problems and solutions, perseveres. | Score Feedback: | Score Feedback: |
| Collaboration: Cooperates with and assists co-workers, Is able to work under supervision, Shows respect for diversity and differing points of view. | Score Feedback: | Score Feedback: |
| Organization and Critical Thinking: Is reliable, Manages time well, Is organized and efficient, Helps to solve problems. | Score Feedback: | Score Feedback: |







Specific Workplace and Career Skills

Performance Assessment Scale:

4 - Consistently and Independently, 3 - Frequently, 2 - Inconsistently and/or with Adult Support, 1 - Rarely

| | Mid-Way Assessment, Date | Final Assessment, Date |
|----|--------------------------|------------------------|
| 1. | Score Feedback: | Score Feedback: |
| 2. | Score Feedback: | Score Feedback: |
| 3. | Score Feedback: | Score Feedback: |
| 4. | Score Feedback: | Score Feedback: |

How much do you agree or disagree with the following statements?

- 1. This work experience met the goals that I set out to accomplish.
 - (a) Strongly agree
 - O (b) Agree
 - O (c) Disagree
 - O (d) Strongly disagree
- 2. This work experience will help me make career decisions in the future.
 - O (a) Strongly agree
 - O (b) Agree
 - O (c) Disagree
 - O (d) Strongly disagree





- 3. I learned new skills as a result of my work experience.
 - O (a) Strongly agree
 - O (b) Agree
 - O (c) Disagree
 - O (d) Strongly disagree
- 4. Overall, I had a positive experience.
 - O (a) Strongly agree
 - O (b) Agree
 - O (c) Disagree
 - O (d) Strongly disagree

Student Signature: _____ Date: _____

