

EMPLOYER'S REPORT

The report is intended to help evaluate the IAESTE exchange programme. You are requested to give your impressions about the trainee who carried out a placement in your Company/University. The information will be forwarded to the sending IAESTE committee and to the trainee.

(The report should be typewritten or written in block letters)

Sending country:	Ref. No.:	Year:
Employer	Trainee	
Name :	Name :	
Address :	University :	
No. of Weeks :	Faculty :	
From: To:		
Payment (in local currency):		

	Excellent	Good	Fair	Poor
1. Over-all Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Relationship with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Attitude/Application to Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Ability to Learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Language Fluency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Any other Attribute (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Kind of Work:

11. Any Comments:

	Excellent	Good	Fair	Poor
12. General Impression of the IAESTE Programme Please Elaborate:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. General Impression of the IAESTE Organisation at Local Level: Please Elaborate:-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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14. Will you be willing to participate again in the programme next year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Date:

Signature:

Thank you for your contribution!

Please return completed form to IAESTE....

For internal IAESTE use: