

Host Work Integrated Learning (WIL) Evaluation Form

VERY IMPORTANT: Please return near the end of the student's work attachment to WIL Coordinator.

Student's Name:	Student ID:			Program:		
Start Date:	End D	ate:				
WIL Placement Host:					1	
WIL Coordinator:			Phone No.	:	E-Mail:	
Evaluation Criteria	Rating	Comment	s	Evaluator Initials	Student Initials	
Student demonstrates safety knowledge &						_
compliance re:						
Company Policy						
 Provincial Regulations 						
Skills Application						
Student exhibits dependability regarding:						
Attendance						
Punctuality						
Ability to follow instructions						
Student fosters good working relations						
with:						
• Supervisors						
• Colleagues						
• Juniors						
Student shows competence in:						
Level of job knowledge						
Adaptability to change						
Organizational ability						
Problem solving						_
Student uses good communication skills:						
Verbal					1	

PERFORMANCE DEFINITIONS

Evaluator's Name & Position (Print)

Written Listening

- 5 Outstanding performance consistently and greatly exceeds the requirements of the job
- 4 Above expected performs at a level beyond what is required for the job
- **3** Expected consistently performs at an acceptable level required for the job
- 2 Needs Improvement/Developing often fails to meet needs of job or inexperienced on job but is developing skills satisfactorily
- 1 Unsatisfactory consistently fails to meet the requirements of the job

Some programs require program-specific evaluations. Additional evaluations may be applied to each specific program by the WIL Coordinator.

Evaluator's Signature

Date



Host Experience Feedback

1.0	Overall, were you satisfied with the Work Integrated Learning (WIL) placement experience?
2.0	Do you have any concerns or suggestions that you would like to bring to the attention of the College?