

Assessment of Student Performance by Industrial Supervisor

Semester: _____ Academic Year: _____

Student Name: _____ Student Matrix No.: _____

Industrial Supervisor's Name: _____ Company: _____

UNISEL Academic Supervisor's Name: _____ Practical Training Duration: _____

SECTION A

The following sections are to be completed by the industrial supervisor. Please evaluate the student's performance by circling the appropriate performance rating:

1 – Unsatisfactory	2 – Weak	3 – Average	4 – Good	5 - Excellent
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A. INTERPERSONAL SKILLS

1. Attitude	1	2	3	4	5
2. Accountability and responsibility to tasks	1	2	3	4	5
3. Appearance	1	2	3	4	5
4. Flexibility towards tasks assigned	1	2	3	4	5
5. Motivational level	1	2	3	4	5
6. Willingness to accept feedback	1	2	3	4	5
7. Quality of work & creativity	1	2	3	4	5

B. SOFT SKILLS

8. Social and human interrelations skills	1	2	3	4	5
9. Communication ability - Oral	1	2	3	4	5
10. Communication ability - Written	1	2	3	4	5
11. Time management skills	1	2	3	4	5
12. Problem solving skills	1	2	3	4	5
13. Computer and system application skills	1	2	3	4	5
14. Teamwork	1	2	3	4	5

C. KNOWLEDGE AND TECHNICAL SKILLS

15. Ability to identify and formulate the job problems	1	2	3	4	5
16. Efficiency in completing job/task	1	2	3	4	5
17. Learning capabilities in the job/task given	1	2	3	4	5
18. Knowledge application and creative thinking abilities	1	2	3	4	5

TOTAL SCORE: / 90

19. Please comment on the strength that the student has displayed during his/her training in your company.

Please provide appropriate bonus score based on student's strength:

BONUS SCORE: / 10

20. Areas for improvement:

TOTAL TRAINING SCORE: / 100

21. Please evaluate the Student's Logbook: **/ 10**

SECTION B - Employment Opportunities

If the student is hired by your organization after her/his Industrial Training, please tick the following:

- | | |
|--|---|
| <input type="checkbox"/> The student is hired as a full time staff | <input type="checkbox"/> The student is hired as a contract staff |
| <input type="checkbox"/> The student is hired as a part time staff | <input type="checkbox"/> Not applicable |

She/he is placed in _____ department

Her/his commencement date is _____

Signed: _____ Position: _____ Date: _____

Industrial Supervisor's Signature and Company's Seal/Stamp:

Please send (post/ fax/ email) to:
HJ MOHD AZRIN BIN ABD RAHIM
INDUSTRIAL TRAINING COORDINATOR
FACULTY OF BUSINESS, UNIVERSITI SELANGOR (UNISEL)
JALAN ZIRKON A 7/A, SEKSYEN 7, 40000 SHAH ALAM, SELANGOR DARUL EHSAN, MALAYSIA
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