

On site Evaluation Affirmation Form

Cooperative Education Program Kasetsart University

Name of workplace _____

Topics discussed during the evaluation are

1. Duties and work plan assigned to the students.
2. Student self-development.
3. Report Topics and work term report.
4. Workplace opinion about cooperative education's procedure and philosophy.
5. Problems arised from the past internship

Evaluation process

1. Meet the student individually Date _____ Time _____
2. Meet the Job Supervisor individually Date _____ Time _____
3. Visit the workplace (*depends on workplace's appropriateness and convenience*)

Names of university's evaluator assessor

1. _____ Position _____
2. _____ Position _____
3. _____ Position _____
4. _____ Position _____

The workplace acknowledged the schedule of student's on-site evaluation on _____(date) at _____(time) including the evaluation details as mentioned above and want to inform the Cooperative Education Program

- () Allow and welcome a group of university's evaluator to evaluate student performance on that day
 () Inconvenient to welcome a group of university's evaluator on that day and want to inform the convenient day as follow

Date _____ time _____ or
 Date _____ time _____

Sincerely yours

Signature.....

(_____)

Position.....

Date.....

Please kindly return this form via fax.