



**GREYSTONE
COLLEGE**
PART OF THE ILSC EDUCATION GROUP

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GREYSTONE COLLEGE CO-OP PROGRAM

MID-TERM COMPANY FEEDBACK REPORT

STUDENT INFORMATION:

STUDENT NAME: _____ SUPERVISOR NAME: _____

STUDENT NUMBER: _____ COMPANY NAME: _____

EXACT NUMBER OF HOURS WORKED: _____

SUPERVISOR'S REPORT:

Overall evaluation of the student's current level of work experience and education.

OUTSTANDING (performed beyond expectations)	VERY GOOD (high-quality performance)	GOOD (performed all tasks as expected)	POOR (marginal performance)	UNSATISFACTORY (performance mostly inadequate)

OVERALL COMMENTS:

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EVALUATION OF THE STUDENT'S WORK:

Please indicate your level of agreement with each statement below by checking the appropriate response.

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
The student's attendance was excellent.				
The student met performance expectations in reaching the following agreed goals: (list the goals agreed on in the letter of agreement)				
GOAL 1:				
GOAL 2:				
GOAL 3:				
GOAL 4:				
GOAL 5:				
OTHER:				
The student was helpful and willing to take on other goals and/or tasks.				

CAREER SKILLS EVALUATION:

Please provide information on some of the “transferrable skills” demonstrated by this student during their work placement with you by checking the appropriate box.

PEOPLE SKILLS	NOT APPLICABLE	UNDERDEVELOPED	SOME EXPERIENCE	WELL DEVELOPED
Sensitivity to others				
Openness				
Respect				
Speaking/presenting				
Active listening				
Persuasion				
Team membership				
Team participation				
Leadership				
TASK SKILLS	NOT APPLICABLE	UNDERDEVELOPED	SOME EXPERIENCE	WELL DEVELOPED
Planning/organising				
Time management				
Practical skills				
Computer skills				
Problem solving				
Business awareness				
Customer focus				
PERSONAL SKILLS	NOT APPLICABLE	UNDERDEVELOPED	SOME EXPERIENCE	WELL DEVELOPED
Learning skills				
Adaptability				
Goal setting				
Initiative				
Independence				
Motivation				
Dependability				
Professionalism				

SUPERVISOR'S SIGNATURE: _____ TITLE/POSITION: _____

DATE: ____/____/____

*We will share your feedback with the student when we meet for their mid-term meeting and encourage you to discuss this evaluation with the student.
Please return a copy of this evaluation to student's coordinator or to coop@greystonecollege.com.*