

تقييم الطالب للشركة  
Students' Self Evaluation  
ST\_STD

Students' Self Evaluation for Summer Training	
Student Name	
Student ID	
Major	
Company Name	
Supervisor Name (Company)	

Please complete this evaluation by selecting the response that best describes your summer training experience

	Excellent 4	V. Good 3	Good 2	Poor 1
Hands on experience				
Training Provided				
Attitude of Supervisor				
Professional Work Environment				
Attitude of Employees				
Overall Impression of Summer Training				
Total				

Based on your experience with this summer training, would you recommend this organization/company for future students?

- YES  
 NO

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_