

THE CO-OP JAPAN PROGRAM

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Co-op Japan Work Term Learning Objectives

Student Name: _____ **Student Number:** _____

Company Name: _____

Discipline: _____ **Email Address:** _____

By establishing Learning Objectives during the first week of your Co-op Japan work term, you will maximize the opportunity to learn and develop, professionally and personally. You must discuss your learning objectives with your supervisor during the first week of your Co-op Japan work term.

1. What technical skills would you like to acquire or improve during this work term?

2. What interpersonal skills would you like to improve or learn more about during this work term?

3. What skills or traits do you see as weaknesses that you would like to work on, and what are your plans for improving these areas?

4. What are your three learning objectives for this work term?

(i) _____

(ii) _____

(iii) _____

Student Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Supervisor's Email: _____ Phone: _____

A copy of your Learning Objectives must be faxed the Co-op Japan Program 604-822-3449, by the third week of your work term. You will be discussing your learning objectives during your on-site visit with a Co-op Japan Program representative. Thank you and enjoy your time in Japan.