

THE CO-OP JAPAN PROGRAM

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Student Evaluation of Co-op Japan Work Terms

Student Name: _____ **University / Discipline:** _____

Company: _____ **Supervisor:** _____

Work Term Period Start Date: _____ **End Date:** _____

Thank you for taking the time to provide feedback on your work terms. Your comments will help The Co-op Japan Program evaluate your satisfaction with your Co-op Japan position.

Please return this form to The Co-op Japan Program within one week of the completion of your work terms, along with your supervisor's evaluation of your performance, your Experiential Work Term Report Release Form and your Experiential Work Term Report. These items are required for the completion of your work terms with The Co-op Japan Program and the submission of your grades.

Job Duties/Work Performed:

POSITION FEEDBACK:

Job Description:	<input type="checkbox"/> Accurate	<input type="checkbox"/> Fairly Accurate	<input type="checkbox"/> Misleading
Orientation to the Office:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Poor
Job Met Expectations:	<input type="checkbox"/> Yes	<input type="checkbox"/> Partly	<input type="checkbox"/> No
Job Difficulty:	<input type="checkbox"/> Too Hard	<input type="checkbox"/> Just Right	<input type="checkbox"/> Too Easy
Workload:			
Quantity:	<input type="checkbox"/> Too Much	<input type="checkbox"/> Just Right	<input type="checkbox"/> Not Enough
Quality:	<input type="checkbox"/> Too Hard	<input type="checkbox"/> Just Right	<input type="checkbox"/> Too Easy
Supervision:			
Frequency:	<input type="checkbox"/> Too Much	<input type="checkbox"/> Just Right	<input type="checkbox"/> Not Enough
Quality:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Poor
Learning:	<input type="checkbox"/> A Lot	<input type="checkbox"/> As Expected	<input type="checkbox"/> Not Enough
Work Term Conditions: (Living Allowance/Dorm/Meals)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Poor

Student Name: _____

Co-op Japan Student Evaluation (continued):

Did you feel adequately Prepared for Japan? Yes Partly No

Were you able to improve your Japanese language skills? Yes Some what No

Did you communicate primarily in Japanese or English: Japanese English

What were your three learning objectives and did you meet them?

(i) _____ Yes/No

(ii) _____ Yes/No

(iii) _____ Yes/No

What were the most valuable aspects of your position?

What were the least valuable aspects of your position?

What are your suggestions for improving this position?

Has this job changed or confirmed your career and academic goals? How?

Would you go back to Japan to work after graduation?

Additional Comments:

Student's Signature: _____ **Date:** _____

THE CO-OP JAPAN PROGRAM STAFF AND ADMINISTRATION:

The Co-op Japan Program is constantly monitoring the service it provides to students and employers. Your input is valuable for the continued development of the program and to provide constructive feedback to staff members. This section is optional and can be submitted anonymously. We greatly appreciate your feedback and endeavor to incorporate student feedback into any changes we make to The Co-op Japan Program.

ENGINEERING CO-OP PROGRAM EVALUATION

Office Administration:

HOW WELL ARE WE DOING?

	Excellent	Good	Fair	Poor
Friendliness and helpfulness of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Face to face skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email and written correspondence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response time to your enquiries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resource for industry information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equitable treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional comments:

Was the program a worthwhile experience? Would you recommend the program to other students?

Please tell us what you like best and feel is most rewarding in being a Co-op Japan student.

Were your expectations of participating in The Co-op Japan Program met? Please explain what areas you feel that The Co-op Japan Program can continue to improve upon.

We appreciate the time you have spent to complete this form. Please return your form to:

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