

### EVALUATION SHEET OF STUDENTS' INTERNSHIP

To be completed by STUDENT

Name .....

Surname.....

N° album.....

Dates of the internship: from ..... till .....

Place of the internship:

Name of the company:.....

Address:.....

### TO BE COMPLETED BY SUPERVISOR OF THE INTERNSHIP

**Please tick the appropriate box:**

Has the Student acquired practical knowledge associated implementation of chemical engineering processes?

definitely **not**

definitely **yes**

<input type="checkbox"/>									
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Has the Student acquired the skills for working in the industry?

definitely **not**

definitely **yes**

<input type="checkbox"/>									
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Was the Student acquainted the functioning of workplace?

definitely **not**

definitely **yes**

<input type="checkbox"/>									
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Has the Student the necessary preparation for industrial work and whether they know the safety rules associated with this work?

definitely **not**

definitely **yes**

<input type="checkbox"/>									
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Is the Student able to work in a team?

definitely **not**

definitely **yes**

<input type="checkbox"/>									
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The final internship's evaluation:.....

[Possible rating: 5,0 (the best score); 4,5; 4,0; 3,5; 3,0; 2,0(fail)]

(Stamp and signature of the representative of the Company)