

PRACTICUM TRAINEE ASSESSMENT REPORT BY ADVISOR / ACIS (REPORT B)						
PRACTICUM DATE / DURATION: _____ - _____						
Name of Trainee : _____						
Matrix Number : _____						
Program Name : _____						
Name of Advisor : _____						
Date Of Visit / Appoinment : _____						
Organization : _____						
Address : _____						
<p>PLEASE EVALUATE THE TRAINEE `S PERFORMANCE BY CIRCLING THE APPROPRIATE PERFORMANCE RATING:</p> <p>1 – Unsatisfactory 2 - Weak 3 – Average 4 – Good 5 – Excellent</p>						
A.	COGNITIVE DEVELOPMENT OUTCOMES					
1.	Job knowledge acquisition at work place.	1	2	3	4	5
2.	Learning opportunities in new tasks / job.	1	2	3	4	5
3.	Application of subject knowledge at work place	1	2	3	4	5
B.	CONSULTATION & STUDENT`S REPORT					
4.	Frequency of meeting with advisor.	1	2	3	4	5
5.	Willingness / responsiveness to advisor`s feedback	1	2	3	4	5
6.	Creativity and independent. (Ability to generate ideas, thoughts, self reliant)	1	2	3	4	5
7.	Accountability level in project report	1	2	3	4	5
8.	Communication and interrelation skills	1	2	3	4	5
9.	Log book and final report output/quality	1	2	3	4	5
10.	Overall trainee`s performance	1	2	3	4	5
TRAINEE`S ASSESSMENT SCORE		(/ 50) x2 = /100				

C.	RESULTS
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CATEGORY	REPORT A (Practicum Score from industry) (100 × 0.6)*	REPORT B (Assessment Score from Advisor) (100 × 0.4)*	Final Practicum Score / Grade (A + B)
Result			
GRADE: PASS / FAIL (Please ✓)			
	50 and above	PASS	
	49 and less	FAIL	

Name of Advisor : _____

Date of Final Evaluation : _____

Signature and Chop of Advisor : _____

<p>D. REMARKS (Advisor to provide report / evidences if student fails the practicum)</p> <p>_____</p> <p>_____</p> <p>_____</p>
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| <ol style="list-style-type: none"> 1. PLEASE SUBMIT BOTH REPORT (A) AND REPORT (B) TO THE HEAD OF PROGRAM OR PRACTICUM COORDINATOR BY THE DATELINE FOR FURTHER PROCESSING 2. ADVISOR IS ADVISED TO KEEP A COPY FOR OWN RECORD |
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