

Cedarville University Student Work-Term Report

To be filled out by the student

Name _____	Date _____
Major _____	
Permanent Address _____	
Co-op Employer _____	
Number of hours worked per week _____ Overtime? _____	
Housing available? If so, what type? _____	
Car necessary? Yes ___ No ___ Number of work terms with this employer _____	
Will you return to this employer for additional work terms? Yes _____ No _____	
Is there potential for full-time employment with this employer? _____	
Are you interested in pursuing full-time employment with this employer? _____	

Based on your experience, rate these items from one to five, with a five being a superior rating:

Ease of communication between me and my supervisor	_____
Evaluation and feedback received from my supervisor	_____
The amount and quality of training I received on the job	_____
My assignments at work closely match my major and career goals	_____
This job has educational value and merit to me	_____

More Information

Please give a brief description of your duties during the past work period: _____

How were your assignments related to your major/career goals? _____

What was your favorite assignment? Why? _____

What was your least favorite assignment? Why? _____

Additional comments about your experience? _____
