

YOUTH WORK IN TRADES APPRENTICESHIP

Sponsor feedback on Youth Work in Trades Student

STUDENT _____

DATE _____

SPONSOR _____

EMPLOYER _____

Please complete the following evaluation form. Your evaluation enables us to help the student gain maximum benefit from this out-of-school learning experience and will contribute to the assignment of a mark for the work based training component of the Secondary School Apprenticeship Program. Please use the following criteria in determining your evaluation:

Mark: Please check the appropriate and complete the marks for that course (WBT = work based training)

☐ WRK 11A (first 120 WBT hrs) *

☐ WRK 11B (120 - 240 WBT hrs)

☐ WRK 12A (240 - 360 WBT hrs)

☐ WRK 12B (360 - 480 WBT hrs)

PLEASE CHECK ()	Extending	Proficient	Developing	Emerging	NO Evidence	N/A
FUNDAMENTAL SKILLS:						
Able to solve problems						
Follows directions						
Uses technology effectively						
Communicates well						
PERSONAL MANAGEMENT SKILLS:						
Dresses Appropriately						
Is enthusiastic						
Accepts constructive criticism						
Adjusts to new situations						
Works independently						
Manages time effectively						
Concentrates on tasks						
Completes assigned projects						
Does his/her share of the work						
Handles equipment safely and effectively						
TEAMWORK SKILLS:						
Works well with other employees						
Shows initiative when appropriate						

Is student more efficient?

Yes ☐

No ☐

N/A ☐

Is the quality of work satisfactory?

Yes ☐

No ☐

N/A ☐

Did the student call in when absent?

Yes ☐

No ☐

N/A ☐

Has the student returned uniform/tools etc?

Yes ☐

No ☐

N/A ☐

Was their overall performance Satisfactory?

Yes ☐

No ☐

N/A ☐

Signature of Employer _____

Thank you for your assistance. Please return this form to the student to deliver or email to burnbul@sd53.bc.ca or mail it to:
Attn Boyd Turnbull, 6161, Okanagan Street, Oliver BC, VOH ITO

(Revised Sept 25)