

## SUPERVISOR'S REPORT

## Work Experience - Wesley College, Dublin

Pupil's Name \_\_\_\_\_

### Dates of Work Experience


Organisation/Company name

Supervisor's Name \_\_\_\_\_

**Guidelines** This report forms an integral part of the overall assessment of work experience for certification at the end of year. It should be completed by a supervisor/manager who has observed the pupil in the workforce.

Please indicate the pupil's performance by placing a tick for each of the criteria under one of the headings. **Excellent** should only be used in cases of outstanding performance.

Criteria	Excellent	Very Good	Good	Satisfactory	Unsatisfactory	Unable to Assess	Further Comments
Interest in the work							Brief description of work undertaken by pupil.
Appropriate dress							
Ability to follow instructions							
Quality of agreed/assigned work							
Practical Skills							
Use of workplace equipment							Any comments or suggestions on work experience arrangements
Punctuality							
Attendance at workplace							
Relating to co-workers							Any other comments
Relating to supervisor							
Communicating with customers							
Acceptance of direction/criticism							
Initiative							
Adaptability							



Signature of Workplace Supervisor

Date \_\_\_\_\_

