WORK EXPERIENCE PLACEMENT STUDENT FEEDBACK

Please complete and return to your form tutor or work experience coordinator.

Student Name:

Year Group:

Work Experience Company Name:

Work Experience Company Contact:

PREPARATION & INTENT

I was well prepared and understood what to expect

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

ORGANISATION & IMPLEMENTATION

I enjoyed the placement

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Employers and staff seemed well prepared

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Employers and staff were engaged and inclusive

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

IMPACT

This placement has helped me to develop key skills (i.e. listening, presenting, problem solving, creativity, staying positive, aiming high, leadership, teamwork)

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

This placement has influenced my career goals

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Continue >

Please reflect here on what you have learned in this event

What went well about this event?

How could this event be even better?