

**KABARAK UNIVERSITY**

**INDISTRIAL ATTACHMENT, INTERNSHIP LOGBOOK.**

# ATTACHMENT LOGBOOK

**SCHOOL………………………………………………………**

**DEPARTMENT……………………………………………….**

**P.O Privatebag 136-90100 Kabarak**

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**E-mail: admin@kabarak.ac.ke**

**Website:** [**www.kabarak.ac.ke**](http://www.kabarak.ac.ke)

## THE LOG BOOK INTRODUCTION

This book aims to assist the attaché to keep a record of the day-to-day activities during the attachment period. It will show the organization in which the attaché has worked on attachment and the period of time spent in that organization.

## ATTACHMENT PROGRAMME

The attaché must follow the set-out attachment programme formulated by the department where he/she is attached. This programme should be given to the attaché at the beginning of the activity. The department should provide an atmosphere for learning desired competencies.

## REPORT WRITING

The attaché is expected to write a daily report on the experiences acquired during the attachment.

The supervisor should give some information on the organization and contact address.

## DAILY REPORT

The daily work carried out during the period of attachment is to be recorded clearly with sketches and diagrams where applicable. This is a summary of work done in a week and should cover all the activities and the level of accomplishment of each. Attachés are required to present the Logbook to the Supervisor/Trainer (Technician) for assessment of content and progress at the end of each week.

## INDUSTRIAL ATTACHMENT TOOLS

1. Attaché’s letter of introduction – containing attaché details, list of areas of practice and familiarization as well as any other important information. The letter is to be distributed to attachés by the industrial attachment coordinator three months before the beginning of attachment period.
2. Logbook - to be downloaded by attachés by from the attachment coordination system two weeks before the end of the term prior to attachment period. The log book is to be filled on a daily basis during the attachment period.
3. Industrial Attachment Assessment Form - to be duly filled and then handed over in duplicate to the Industrial Attachment Officer (ILO) or uploaded to industrial attachment coordination system on completion of attachment period. **(Pages 42 and 43)**

## Attaché’s Particulars

Last Name:………………………………………………………………………….

Other Names:……………………..…………………………………………………... Identity Card No:………………………………………………………………….......

Admission No:………………………………………………………………………...

Date of Birth: Date……………......Month………….……..Year…………………….

Course…………………………Level………………..Year/Module………………….

Home Address……………………………Code…………..Town…………………….

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Telephone……………………………………………………………………………….

## Next of Kin

Name:………………………………….Relationship:………………………..……….

Postal Address:……………………..Postal Code:……………..Tel:………………….

**Details of Attachment Place:**

Name of Organization:………….……………………..………………………………. Postal Address……………………………………..Code:…………………………….

Tel…………………………………Fax / E-mail ……………….……….……………

Name of Industry Based Supervisor:…………………………………………………… Position/ Designation:…………………………………………………………………..

Mobile Contact …………………………………………………………………………

Attachment duration period:

From: ……………………………………….………To: ………………………………

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**PART II** – *To be filled by the Industry Based Attachment Trainer/Technician*

Comments………………………………………………………………………………………… …………………………………………………………………………………………………..

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Name…………………………….Signature………………………..…Date…………………….

**PART III** – *To be filled by the Industry Based Attachment Supervisor*

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Name………………………….Signature………………………..…Date…………………….….

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**PART II** – *To be filled by the Industry Based Attachment Trainer/Technician*

Comments………………………………………………………………………………………… …………………………………………………………………………………………………..

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Name…………………………….Signature………………………..…Date…………………….

**PART III** – *To be filled by the Industry Based Attachment Supervisor*

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Name………………………….Signature………………………..…Date…………………….….

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| **MONDAY** |  |  |
| **TUESDAY** |  |  |
| **WEDNESDAY** |  |  |
| **THURSDAY** |  |  |
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**PART II** – *To be filled by the Industry Based Attachment Trainer/Technician*

Comments………………………………………………………………………………………… …………………………………………………………………………………………………..

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Name…………………………….Signature………………………..…Date…………………….

**PART III** – *To be filled by the Industry Based Attachment Supervisor*

Comments………………………………………………………………………………………… …………………………………………………………………………………………………….

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