

Supervisor's Approval: To be completed by Co-op Employer

I approve the release of this report to the University of Victoria for evaluation purposes only.

The report is to be considered (**select one**): ☐ NOT CONFIDENTIAL ☐ CONFIDENTIAL

Signature: _____ Position: _____ Date: _____

Name (print): _____ E-Mail: _____ Fax #: _____

If a report is deemed CONFIDENTIAL, a non-disclosure form signed by an evaluator will be faxed to the employer. The report will be destroyed following evaluation. If the report is NOT CONFIDENTIAL, it will be returned to the student following evaluation.