

**STUDENT INDUSTRIAL
WORK EXPERIENCE SCHEME
(SIWES) UNIT**

Phone: 08030402302

E-mail: siwes@abuad.edu.ng



AFE

**BABALOLA
UNIVERSITY**

ADO-EKITI (ABUAD)

KM. 8.5, AFE BABALOLA WAY,

P.M.B. 5454,

ADO-EKITI, EKITI STATE, NIGERIA.

www.abuad.edu.ng

STUDENTS' EVALUATION FORM

PART A (To Be Completed by Student)

1. Name of Student: Matric. Number.....
2. Department..... Level: Session:
3. Name of Company.....
4. Address.....
5. Date of commencement..... Expected Date of Completion:
6. Student's Signature and Date.....

PART B (To be Completed by Industry-based Supervisor)

- Please assess the student as follows:

Criteria	Excellent	Good	Average	Below Average	Poor
Punctuality					
Comportment					
Independent Reasoning					
Creativity/Innovation					
Professionalism					
Practical Application					
Analytical Reasoning					

Kindly tick the student's performance criteria that best reflect your observations.

- Indicate your rating for this student, from 1 (lowest) to 10 (highest), in the space provided in this box

7. Additional (Comments Industry-Based Supervisor)

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Name of Industry-Based Supervisor:

Signature/Date/Stamp:

PART C (To be Completed by Institution-based Supervisor)

8. Comments by Institution-Based Supervisor

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Name/ Email/Phone Number:

Signature/Date: