



**2025 Practical Training Program for DOST-SEI Scholars
TRAINING PROGRAM FORM**

- A. Name of Scholar-Trainee : _____
- B. Training Institution : _____
Address : _____
Telephone No. : _____
E-mail Address : _____
Name of Head of Office : _____
Designation : _____
- C. Training Plan :

ACTIVITY	DURATION	PERSON-IN-CHARGE/ SUPERVISOR

D. Resources available for scholar-trainee's use

	EQUIPMENT		SOFTWARE	OTHERS
	Type	No. of Units		

E. (OPTIONAL) Remuneration/Incentive/Token your office is willing to give the scholar-trainee. (Please check the appropriate box)

Amount

- Salary _____
- Transportation Allowance _____
- Daily Allowance _____
- Others, Please specify _____

Prepared By:

Training Supervisor _____
Signature _____
Designation _____
Date _____



**2025 Practical Training Program for DOST-SEI Scholars
TRAINEE'S EVALUATION OF THE TRAINING**

Name : _____

Course and School : _____ Year of Award : _____

Institution/Company Assigned : _____

Company Address : _____

Name of Supervisor : _____

Designation : _____

Use extra sheets if necessary.

I. BRIEF DESCRIPTION OF THE INSTITUTION/COMPANY

A. Organization

B. Type of Institution [] Government [] Private [] Academe [] NGO

II. TRAINING PROPER

Duration of training _____

Total number of training hours completed _____

A. Duties and Responsibilities Assigned.

ACTIVITIES UNDERTAKEN (DESCRIPTION OF TASK ASSIGNED)	TYPE *	APPROXIMATE NUMBER OF HOURS	% TO TOTAL NO. OF TRAINING HOURS

* R – Research

NR – Non-research

B. Facilities (Laboratories/Machineries)

III. PROBLEMS ENCOUNTERED (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Relationship with supervisor | <input type="checkbox"/> Lack of resources
(references, chemicals etc.) |
| <input type="checkbox"/> Relationship with co-workers | <input type="checkbox"/> Too much work assignment |
| <input type="checkbox"/> Inadequate training for job | <input type="checkbox"/> Insufficient time to complete work |
| <input type="checkbox"/> Insufficient amount of work
assignment | <input type="checkbox"/> Others (specify) _____ |
| <input type="checkbox"/> Assignment of more non-technical
Work | <hr/> |
| | <input type="checkbox"/> None |

IV. ATTITUDE AND PERFORMANCE

Below are statements to guide you in evaluating your performance and attitude towards the training. Write the number that corresponds to your opinion on the box after each statement using the following ratings:

AGREE 1 2 3 4 5 DISAGREE

1. I was given the opportunity to utilize the theories and ideas I have learned in school. []
2. I gained experience and knowledge which would be very helpful in my future job. []
3. The work assigned to me challenged my intellectual faculties. []
4. I learned how to work in harmony with supervisors and co-workers. []
5. I gained more insights into national problems which I was previously aware of before the training. []
6. The training helped me realize my goal(s) and the importance of my career. []
7. It enriched my practical experience in actual research along my field of specialization. []
8. The time allotted for the training was sufficient to grasp the ideas about my role as a student at the same time as a future professional worker. []
9. The training period, specifically, the school break prior to my last year in college, is timely. []
10. I should have been trained somewhere else where my undergraduate training could be more utilized. []

V. RECOMMENDATIONS

Submitted By:

Scholar-Trainee's Signature

Date



2025 Practical Training Program for DOST-SEI Scholars
EVALUATION OF TRAINEE'S PERFORMANCE AND ATTITUDE

TO THE EVALUATOR

Kindly fill out the necessary information concerning the performance and attitude of the scholar-trainee who undertook practical training in your company/institution.

Thank you for accommodating our scholar-trainee and for the assistance you have extended to him/her.

Name of Scholar-Trainee : _____
Company/Institution : _____
Address of Company/Institution : _____
Training Period : _____ No. of Accomplished Training Hours : _____

A. Trainee's Performance

Please describe the activities undertaken by the scholar-trainee and his/her attitude by giving the corresponding rating for each using the following:

1 – Outstanding 3 – Satisfactory 5 – Poor
2 – Very Satisfactory 4 – Fair 6 – Others (please specify)

ASSIGNED TASK	NO. OF HOURS DEVOTED TO COMPLETE THE TASK	PERFORMANCE RATING

B. Attitude Towards Training

Please rate the scholar-trainee's attitude towards the training using the same rating scale above.

<u>ATTITUDE</u>	<u>RATING</u>	<u>REMARKS</u>
1. Public Relations Ability to get along with a. Supervisor b. Co-workers/co-trainees	_____	_____
2. Punctuality/Attendance	_____	_____
3. Knowledge of Trainee gained from school	_____	_____
4. Initiative	_____	_____
5. Intellectual Capacity	_____	_____
6. Dependability	_____	_____

C. Recommendations

Rated By:

Signature of Evaluator

Printed Name and Designation

Date

Conforme:

Scholar-Trainee's Signature

Date