

On-the-Job Training Plan

Name of Company Name of OJT Supervisor		Name of Student Trainee Program		
Job Designation		STI Campus Training Period Required no. of hours		
Period	Area/Topic	Specific Tasks	Expected Output	No. of h spen
THE REPORT OF THE PROPERTY OF	THE TAXABLE STATE OF			The transfer of the transfer o
Noted by:	OJT Adviser STI College Southwoods	OJT Supervisor		
1	Student Trainee	Date of Agreement		



PERFORMANCE APPRAISAL

Last Name	First Name		MI
STI Campus	Program	Year Level	Continu
311 Campus	Year Level	Section	
Host Company		/	
OJT Supervisor	Designation	Evaluation Period	Total No 511-
Ost Supervisor	Designation	Evaluation Period	Total No. of Hours
Evaluation Crit			
Evaluation Citi		Rating	Equivalent Grade
Technical Competence (25%)			
Effective application of skills and technical know	vledge in meeting the requirements or		
accomplishing goals of assigned tasks and proje			
Attitude (25%)	-		
Attitude towards work, such as willingness to le			
dependability, trustworthiness, resourcefulness			
problems in the area of work and such other qu	ialities that may be pertinent		
Quality of Work (20%)		7.00 (200)	
Work standards, accuracy and reliability of out	out, and on-time delivery of		
requirements	and and an entire desired y or		
Quantity of Finished Work (10%)			
Work accomplished per evaluation period			
Inter-Personal Relationships (10%)			
Communication skills and attitude towards peo	ple		
-			
Attendance and Punctuality (10%)			
Number of absences and tardiness per evaluati	on period		
		TOTA	AL
Comments/Remarks:	(*)		
commency nemarks.		Ra	ating Equivalent
•		Rating	
		98-100	
		89-97	Very Good
e	-	80-88	Satisfactory
		75-79	Fair
		Below 7	5 Failed
Reviewed by:	Date		
obsections and (Title 1 ≥ Ti)			
	*		
OJT Supervisor's Signature	_		



OJT On-Site Supervisor Signature

DAILY TIME RECORD

Last Name	t Name						First Name						MI
STI Campus						Program Year Level					vel	Section	
Host Company					Department Assigned to					,			
OJT Supervisor Designation					Schedule OJT Period					riod			
	Mor	nday	Tue	sday	Wedn	nesday	/ Thursday Friday			Saturday		Total No.	
Week No.	Time In	Time Out	Time In	Time Out	Time In	Time Out	Time In	Time Out	Time In	Time Out	Time	Time Out	of Hours
Date				Out	<u> </u>	Out	"	Out	""	Out	"	Out	per Week
1	7/11							_					
Date													
2													
Date													
3	y - 111 (
Date						-					1		
4													
Date													
5													
Date													•
6													5%
Date													
7					,								
Date													
8										7,000			
Date													
9													
Date							=						
10			e						-				
	VI E POR CONTRACTOR						-		L			Total	
Reviewed by:					Da	ite							