

BEYKOZ UNIVERSITY

Applied Training Workplace Official Evaluation Form

Student's Name and				
Surname Faculty/School/Vocational				
School				
Department / Program				
Student Number				
Name of Business				
Name and Surname of				
Official Responsible for				
Training				
Date	All the scores issued will	ho on a scale of 100		
 All the scores issued will be on a scale of 100 The form needs to be filled in over the system at the end of the term. 				
		ness Official to Evaluate the Student	Score	
1	Compliance with working		000.0	
-	Compliance with	g		
2	workplace rules			
3	Compliance with the safety measures required by the workplace			
4	Fulfilling duties completely and in a timely manner			
_	Command of basic concepts regarding their			
5	profession Use theoretical knowledge for practical			
6	implementation			
	Proper use and safekeeping of the instruments and			
7	tools in the workplace	· · · · · · · · · · · · · · · · · · ·		
8	Enthusiasm and effort shown at workplace			
9	Awareness of responsibilities regarding the profession			
10	Easy to work with			
11	Self-expression and use of body language			
12	Open to suggestions and criticism			
13	Endurance for physical and mental fatigue			
Course Success Grade (Arithmetic Average of the Scores):				
Your Views & Suggestions:				

Name of Official Responsible for Workplace Training

Signature /Seal