

NAME OF STUDENT:..... THUD MARY WANGARI
REGISTRATION NUMBER OF THE
STUDENT:..... L955/14077/2015
NAME OF ORGANISATION:..... COUNTY GOVERNMENT OF NAKURU
NAME OF THE DESIGNATED
SUPERVISOR:..... MADREEN LITINDA
....
POSITION OF THE DESIGNATED
SUPERVISOR:..... LEGAL COUNSEL
....

1. How was the conduct of the student at the organization?

- ☒ a. Satisfactory
- b. Good
- c. Poor

Any additional
comment.....

N/A

2. Did the student complete the assignment(s) assigned to him or her?

- ☒ a. Yes
- b. No

Any additional
comment.....

N/A

3. Did the student complete the assignment(s) within the time allocated to him/her?

- ☒ a. Yes
- b. No

Any additional
comment.....

N/A

4. How was the quality of the completed assignments?

- a. Satisfactory
- ☒ b. Good
- c. Poor