

C	TO BE COMPLETED BY SUPERVISOR
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- 1) **Student's rating for the following:**
(On a scale 1 to 8)

Very Poor	1	2	3	4	5	6	7	8	Excellent

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|----|-------------------------------|---|
| a) | Diligence | <input style="width: 100%;" type="text"/> |
| b) | Attendance | <input style="width: 100%;" type="text"/> |
| c) | Interest | <input style="width: 100%;" type="text"/> |
| d) | Work quality and efficiency | <input style="width: 100%;" type="text"/> |
| e) | English proficiency: | |
| | i. Written | <input style="width: 100%;" type="text"/> |
| | ii. Oral | <input style="width: 100%;" type="text"/> |
| f) | Ability to work independently | <input style="width: 100%;" type="text"/> |
| g) | Overall performance | <input style="width: 100%;" type="text"/> |

- 2) **Comments/Recommendations:**

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Date

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Signature

Name :

Official Stamp :

ADVANCE STUDIES UNIT:

Total Semester of Study:

Date Received:

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Signature

Name :

Date :