|  |
| --- |
| IVE INFORMATION TECHNOLOGY |
| Industrial Attachment Program |
| Extended Industrial Attachment Program |
| Future-ready Talent Incubation Program |
| Student Hand Book and Guideline |
|  |
|  |
|  |

AY{programInfo.firstYear}/{programInfo.thisYear}

|  |
| --- |
|  |

{programInfo.programmeCode}/ {personalInfo. englishName}/{programInfo.stuNo}

**1 Industrial Attachment Programme**

Industrial Attachment (IA) is a “work-based experience programme” providing a real-life organizational context for students to develop specific or generic skills, valuable to their professional development.  
  
Students can apply and enhance their skills in reality, contribute to the organization, and, at the same time, obtain invaluable guidance from their workplace supervisors. They can also identify their own strengths and weaknesses through their self-evaluation and feedback from the mentors.

**1.1 Programme Structure**

The cumulative total duration of the attachment should be at least 90 hours, which can be taken place during term-time or summer vacation (i.e. July-August). Work related to a small project, as well as specific tasks such as research, production, administration, or day-to-day operation are excellent opportunities.  
  
All participating students will be assigned a workplace supervisor who provides supervision and feedback to the students. A pre-assigned Academic supervisor will keep close contact with the student and the workplace supervisor during the attachment period. The overall assessment shall be done by Academic supervisor based on the evaluation and feedback from the workplace supervisor.

**2 Responsibilities of Participating Parties**

2.1 Participating Company/Organization

* To provide training and/or working opportunities for the student
* To assign a workplace supervisor for the student on attachment
* To provide a safe working environment and on-the-job safety instruction for the student
* To allow the Academic supervisor to visit the student at least once during the attachment period

2.2 Participating Workplace Supervisor

* To provide advice and ongoing feedback on student performance.
* To keep in close contact with the Academic supervisor to provide feedback on student work, progress and performance throughout the attachment period
* To inform Academic supervisor at once of a student’s absence of any 2 consecutive half-days.
* To immediately inform the Academic supervisor concerned of any accidents or injuries that involve the student during the attachment

2.3 IVE

* To provide guidance to the student on working attitudes, workplace safety and relevant key skills before the attachment
* To ensure that each student on attachment is covered by a Group Personal Accident Insurance Policy
* To assign an Academic supervisor to liaise with the company to set up attachment visit(s) to meet with the student / workplace supervisor concerned

2.4 Academic supervisor

* To provide guidance, monitor, and document the progress of the student during the attachment period
* To keep in close contact with the workplace supervisor throughout the attachment period and act on / follow up any areas of concern with the student and/or the company
* To provide ongoing feedback to the workplace supervisor and the student to foster effective communication and establish supportive relationships before, during and after the attachment period

2.5 Student

* To observe the rules and regulations (in particular, those relating to safety and security) of the company
* To comply with the instructions and orders of their Academic supervisor (s), workplace supervisor(s) and such staff members of the company, as the job requires
* To observe the office hours of the company and be punctual
* To behave appropriately (as advised by the Academic supervisor and Workplace supervisor) as a representative of IVE in the important role of attachment student at the company
* To observe and comply with the legal laws where the attachment takes place
* To take care of herself/himself during and after work hours and not to leave the factory building or dormitory at night if the attachment is outside Hong Kong
* To notify the workplace supervisor before s/he leaves the factory or dormitory if it is located outside Hong Kong
* To report any unsafe working conditions or other concerns to the workplace supervisor and/or the Academic supervisor
* Not to take unapproved leave during the attachment period

**3 Assessment**

Both the workplace supervisor and Academic supervisor shall keep close contact with the student and each other, and provide necessary support and assessment for the student during the attachment period. Assessment shall include but not limited to interview, periodic and final review. Workplace supervisor should complete the final report at the end of the attachment. <Refer to Appendix 6>

During the industrial attachment, students are required to:

* Follow the schedule and complete the attachment as agreed in the Statement of Understanding.
* Log what they have learnt and experienced in the workplace as frequent as possible
* Complete the periodic report and seek endorsement from the company/Workplace supervisor <Refer to Appendix 4>
* Report to Academic supervisor during the visit

Either PASS or FAIL will be given to student with indication in the student report.

**4 Periodic Review by Academic Supervisor**

Academic supervisor will keep a close monitoring of student progress in the workplace and make a visit as an interim review. During the visit, the Academic supervisor will meet with student and workplace supervisor, review what the student has learnt, prepare the coming work plan, give advices and provide assistance if necessary. <Refer to Appendix 5>

**5 Student’s Evaluation on Industrial Attachment**

After the completion of an industrial attachment, each student is required to complete an evaluation report to consolidate his/her own advancement and experience gained. The report has to be submitted within one month after the completion of the industrial attachment. <Refer to Appendix 7>

**6 Insurance Coverage**

The VTC Group Personal Accident Insurance provides insurance cover to students while they are participating in the industrial attachment. Students are advised and encouraged to, if they prefer, take out additional/supplementary insurance coverage on their own for personal accidents, medical, travel, and/or third party liabilities. <Refer to Appendix 3>

**7 Appendices:**

Appendix 1 : Student Information (Student)

Appendix 2.1 : Industrial Attachment Form (Organization)

Appendix 2.2 : Statement of Understanding (Organization)

Appendix 3 : Insurance Coverage for Students (Parent/Guardian) (Optional)

Appendix 4 : Periodic Report (Student)

Appendix 5# : Visiting Report (Academic supervisor) (Optional)

Appendix 6 : Final Report (Workplace supervisor)

Appendix 7 : Evaluation Report (Student)

Appendix 8 : Industrial Attachment Certificate (Template) (Departmental IA Coordinator)

Appendix 9.1\* : Personal Information Collection Statement (Student)

Appendix 9.2\* : Evaluation for Students’ Performance on Latest Technology (by Workplace supervisor

Appendix 9.3\* : Summary of Problem-based Industrial Project (by Student and Academic supervisor

Appendix 9.4\* : Continuous Professional Development Record (by Student)

e.g. Training/Seminar

Appendix 9.5\* : One-year Employment Record (Academic supervisor)

*\*For “Future-ready Talent Incubation Program” only.*

*#Mandatory for “Extended Industrial Attachment Program” and “Future-ready Talent Incubation Program*

**Appendix 1 – Student Information (Student)**

**Privacy Policy Statement:** The information collected in this application form will be used for activities related to the industrial attachment (IA) scheme. The VTC undertakes to keep the personal data provided by applicants confidential. However, VTC may provide such information to any other person or agent for processing and conduction of the IA scheme under a duty of confidentiality to VTC. The application form will normally be disposed of no later than one year after completion of the IA scheme.

**Instructions**:

1. Read carefully before completing.
2. Print clearly in **BLOCK CAPITALS** in the spaces provided (do no write).
3. Use a **black** pen (no pencils or colored ink).
4. Please provide accurate and complete information (update as required)

|  |
| --- |
| **Student’s Information:** |
| Name of student: (English) {personalInfo.englishName} | | | | (Chinese) {personalInfo.chineseName} | | |
| HKID No.: {personalInfo.hkid} | | Student ID: {programInfo.stuNo} | | | | Department:  {programInfo.department} |
| Programme Code: {programInfo.programmeCode} | | | Campus: {programInfo.campus} | | | Year of Study/ Class: {programInfo.class} |
| Programme Title: {programInfo.programmeTitle} | | |
| Contact telephone number: {personalInfo.tel} | | | E-mail Address: {personalInfo.email} | | | |
| **Academic supervisor:** | | | | | | |
| Name: {iaSupervisor.name} | | | | | Post : {iaSupervisor.post} | |
| Phone No.: {iaSupervisor.tel} | | | | | Email: {iaSupervisor.email} | |
| **Medical Information:**  *List any medical conditions or disabilities which could affect choice of work attachment placement:* | | | | | | |
| {#medicalInfo.hasAllergies}🗹{/medicalInfo.hasAllergies}{^medicalInfo.hasAllergies}🞎{/medicalInfo.hasAllergies}Allergies: {medicalInfo.allergies} | | | | {#medicalInfo.hasPrescriptionDrugs}🗹{/medicalInfo.hasPrescriptionDrugs}{^medicalInfo.hasPrescriptionDrugs}🞎{/medicalInfo.hasPrescriptionDrugs}Prescription drugs: {medicalInfo.hasPrescriptionDrugs} | | |
| {#medicalInfo.hasPhysicalLimitations}🗹{/medicalInfo.hasPhysicalLimitations}{^medicalInfo.hasPhysicalLimitations}🞎{/medicalInfo.hasPhysicalLimitations}Physical limitations: {medicalInfo.hasPhysicalLimitations} | | | | {#medicalInfo.hasOther}🗹{/medicalInfo.hasOther}{^medicalInfo.hasOther}🞎{/medicalInfo.hasOther}Other: {medicalInfo.other} | | |
| **Emergency Contact Information:** *In the case of any emergency regarding the student, please contact* | | | | | | |
| Name: {emergencyContact.name} | | | | Home Tel: {emergencyContact.homeTel} | | |
| Relationship to Students: {emergencyContact.relationship} | | | | Mobile Tel: {emergencyContact.mobile} | | |
| Place of Work: {emergencyContact.placeOfWork} | | | | Work Tel: {emergencyContact.workTel} | | |
| Doctor: {emergencyContact.doctorName} | | | | Tel: {emergencyContact.doctorTel} | | |
| **Signed Acknowledgements:** | | | | | | |
| *I have completed all information accurately and completely to the best of my knowledge.* | | | | | | |
| Date:  {today} | | | | | Student’s Signature: | |

**Appendix 2.1 – Industrial Attachment Form (Organization)**

Please return this completed form by email (rwmwong@vtc.edu.hk) or fax (Fax No.: 2556 9190)

Mr. Raymond WONG, Project Officer, IT Discipline Planning Office,

Hong Kong Institute of Vocational Education (Phone No.: 2595 2551)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Part A: Details of Participating Organization** | | | | | | | | | | |
| Organization Name:  (Chinese) | {iaCompany.chineseName} | | | | | | {iaCompany.englishName}  (English) | | | |
| Address: | {iaCompany.address} | | | | | | | | | |
| District: | {iaCompany.district} | | | | | | | Business Registration Certificate No. (optional): | | {iaCompany.businessRegistrationCertificateNo} |
| Nature of Business: | (a) {iaCompany.nature}  If others, please specify: {^iaCompany.isIT}{iaCompany.nonITNature}{/iaCompany.isIT} | | | | | | | | | (b) {iaCompany.type} |
| **Part B: Details of Workplace supervisor** | | | | | | | | | | |
| Name: | {iaMentor.prefix} {iaMentor.name} | | | | | | | Position: {iaMentor.position} | |  |
| Tel. No.: {iaMentor.tel} |  | | | Fax No.: | {iaMentor.fax} | | | E-mail Address: | | {iaMentor.email} |
| **Part C: Details of Industrial Attachment** | | | | | | | | | | |
| Job Title: | {iaJob.title} | | | | | | | No. of Places: {iaJob.noOfPlace} | |  |
| Job Area: | {iaJob.area}  If others, please specify: {^iaJob.isIT}{iaJob.nonITArea}{/iaJob.isIT} | | | | | | | Department: {iaJob.department} | |  |
| Job Description:  {iaJob.description} | | | | | | | | | | |
| (i) Particular / Specialized Skills Required:  {iaRequirement.skillReq} | | | | | | | | | | |
| (ii) Language Requirements: | (a) Cantonese: {iaRequirement.chiReq} | | | | | (b) English: {iaRequirement.engReq} | | | (c) Putonghua: {iaRequirement.putReq} | |
| (iii) Disciplines of Student Preferred: | | | | | {iaRequirement.discPreferred} | | | | | |
| (iv) Others (Please specify additional requirements): | | | | | {iaRequirement.otherReq} | | | | | |
| Attachment Period: | (a) Expected Start Date:  (YYYY-MM-DD) | | | | {iaJob.startDate} | | | (b) Expected Finish Date:  (YYYY-MM-DD) | | {iaJob.endDate} |
| Working Basis: | {iaJob.property} | | | | | | | Working Days per Week: | | {iaJob.dayPerWeek} |
| Working Hours per Day: | {iaJob.hrPerDay} | | | | | | | Shift Duty?: | | {iaJob.shiftDuty} |
| Working Hours: | (a) From (HH:MM): {iaJob.workingHrFr} | | | |  | | | (b) To (HH:MM): {iaJob.workingHrTo} | |  |
| Allowance:  (amount and unit) | $ {iaJob.allowance} | | per {iaJob.allowancePer} | | | | | Paid at the End of Each working: | | Day / Week / Month / Scheme \* |
| Overtime Allowance:  (if any) | $ {iaJob.overtimeAllowance} | | | | | | | Completion Bonus:  (if any) | | $ {iaJob.bonus} |
| Address of Workplace:  (if not the address above) | | {iaJob.address} | | | | | | District of Workplace  (if not the district above) | | {iaJob.district} |
| Work outside HK?: | {iaJob.workOutsideHK} | | | | | | | | | |
| Country of Workplace: | {iaJob.country}  If others, please specify: {^iaCompany.isHK}{iaCompany.nonHKCountry}{/iaCompany.isHK} | | | | | | | | | |

*\* Delete as appropriate*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date: |  | Signature: |  | Company Chop: |  |

**Appendix 2.2 – Statement of Understanding (Organization)**

**Statement of Understanding**

**Between**

**{iaCompany.englishName}**

**and**

**Hong Kong Institute of Vocational Education**

*(To be completed in triplicate)*

|  |  |  |
| --- | --- | --- |
| **(A)** | The Parties This document constitutes a tripartite agreement between the organization (such as company, school, association, etc.) providing attachment place(s) (hereinafter referred to as the “Organization”), the Hong Kong Institute of Vocational Education (hereinafter referred to as “IVE”) and the student who accepts the offer of attachment place (hereinafter referred to as the “Student”). | |
| **(B)** | Objectives of the Collaboration  1. To increase student industrial exposure opportunities in order to allow students to gain experience in a real industrial/commercial environment, to build on their subject discipline knowledge, and develop and document the essential Key Skills for learning, employment and life 2. To strengthen the quality of vocational education provided by IVE 3. To provide the Organization with a good opportunity to learn more about IVE students 4. To provide information of the current job requirements to assist IVE teachers with their curriculum planning and selection of modes for course delivery 5. To strengthen current initiatives and explore the possibilities for future joint development of mutually beneficial partnership opportunities/projects |
| **(C)** | **Function of the Statement**  This Statement of Understanding provides general guidelines within which the Industrial Attachment (IA) scheme will be implemented. The details about the implementation of this statement are to be formulated and agreed upon amongst the parties on the basis of mutual benefit. |
| **(D)** | **Responsibilities of the Participating Parties**  (i) Organization   * To provide training and/or working opportunities for Student from Department of Information Technology {programInfo.campus} * To assign an Workplace supervisor for Student on attachment * To provide a safe working environment and on-the-job safety instruction for Student * To keep in close contact with the IVE IA Coordinator to provide ongoing feedback on Student progress and programme issues / concerns throughout the attachment period * To report to IVE at once of Student’s absence of any 2 consecutive half-days. * To immediately inform the Academic supervisor/IVE IA Coordinator concerned of any accidents or injuries that involve Student during the attachment * To allow the Academic supervisor/IVE IA Coordinator to visit Student at least once during the attachment period   (ii) (Department/Campus) / IVE   * To provide guidance to Student on working attitudes, workplace safety and relevant Key Skills before the attachment * To ensure that Student on attachment is covered by a Group Personal Accident Insurance Policy * To assign an Academic supervisor to liaise with Organization to set up attachment visit(s) to meet with Student and Workplace supervisor concerned * To provide guidance, monitor, and document the progress of Student during the attachment period * To keep in close contact with Organization throughout the attachment period and act on / follow up any areas of concern with Student and/or Organization * To provide ongoing feedback to the Workplace supervisor and Student to foster effective communication and establish supportive relationships before, during and after the attachment period   (iii) Student   * To observe the rules and regulations (in particular, those relating to safety and security) of Organization * To comply with the instructions and orders of their Attachment Coordinator(s), Supervisor(s) and such staff members of Organization, as the job requires * To observe the office hours of Organization and be punctual * To behave appropriately (as advised by the Academic supervisor and Organization) as a representative of IVE in the important role of attachment Student at Organization * To observe and comply with the legal laws where the attachment takes place * To report any unsafe working conditions or other concerns to the Workplace supervisor and/or the Academic supervisor * Not to take unapproved leave during the attachment period |
| **(E)** | Termination of the Scheme  1. Organization shall have the right to terminate the attachment offer for Student in case he/she has infringed the Organization’s rules and regulations. 2. IVE shall have the right to terminate the Scheme for Student in case the work that he/she involved lacks a training element. 3. If Student wishes to withdraw from the workplace attachment, he/she should first contact the Academic supervisor. Prior approval of both the Workplace supervisor and the Academic supervisor is required. 4. Before termination of the Scheme takes effect, for whatever reasons, the participating parties should discuss in a co-operative manner with a view to providing the best possible solution for Student, IVE and Organization concerned. | | |
| **(F)** | **Principle of operation**  This Statement of Understanding, although not a legally binding commitment, sets out the responsibilities that have been identified and the consensus reached among the parties concerned. | | |
| **(G)** | **Attachment Duration and Allowance**   1. The attachment duration is fixed at \_\_\_\_\_\_ weeks (from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_). Student will serve Organization \_\_\_\_\_ day(s) per week on regular / request / project basis\*. The placement is stationed in / outside \* Hong Kong. 2. Student is entitled to a training allowance which is mutually agreed by all parties. 3. The allowance is proposed to be NOT less than HK$\_\_\_\_\_\_\_\_\_ per day. 4. The allowance shall be paid to the student at the end of each working day / week / month\*. 5. Student is entitled to a bonus of HK$\_\_\_\_\_\_\_\_\_ upon satisfactory completion of the attachment and the payment is to be made on the last working day of the attachment. | | |
| **(H)** | *\*delete as appropriate*  **Other conditions**   1. Organization may not ask Student to sign a separate Employment Contract or any other Agreement. 2. If Student on attachment wishes to make formal comments, requests or complaints concerning the training (including applications for withdrawal from the industrial attachment), these shall then be handled jointly by the Workplace supervisor, and the IVE IA Coordinator concerned, in consultation with Student. 3. The parties will work together with the goal to jointly resolve any difficulties or misunderstanding which may arise, in a spirit of cooperation and mutual trust. | | |

|  |  |  |
| --- | --- | --- |
| Signature |  | Signature |
| Name of representative  Title of representative  Organization Name  Date |  | Name of Head of Department  HoD( IT )/IVE ( )  Date |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Student in Class \_\_\_\_\_\_\_\_\_\_\_\_\_of HD Programme \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), am a participant of the industrial attachment programme/scheme (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_). I have read and understand the information on the Statement of Understanding as stated. I agree to abide by all terms as stipulated in this Statement of Understanding.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, “**do not have**” a conviction record against the specified list of sexual offences as at a particular date on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Day/Month/Year).

|  |  |  |
| --- | --- | --- |
| Signature |  |  |
| Name of Student  HKID No.  Date |  |  |

*(Note: Organization, Student and IVE keep one copy of this Understanding each.)*

**Appendix 3 – Insurance Coverage for Industrial Attachment Students (Optional)**

* 1. There are three insurance policies that cover students joining industrial placement (i.e. industrial attachment):
     1. The VTC Group Personal Accident Insurance provides cover to students/trainees while they are participating in school activities of the Vocational Training Council. There is a world-wide extension applicable for temporary visits. The sum insured is currently $100,000 for each insured person. It covers accidental death and disablement benefits.
     2. Additional Insurance for local industrial attachment:

1. Accidental death and disablement benefits up to $100,000
2. Hospital and Out-patient Medical Expenses

(arising out of accident during attachment) up to $5,000

Personal Liability (under Hong Kong jurisdiction) up to $1,000,000

* + 1. Additional Insurance for overseas industrial attachment

1. Accidental death and disablement benefits up to $100,000
2. Hospital and Out-patient Medical Expenses

(arising out of accident during attachment) ` up to $100,000

Personal Liability

(for attachment in China: under China’s Mainland jurisdiction) up to $500,000

(for overseas attachment other than in China: up to $500,000

under HK’s jurisdiction)

iv. Emergency Evacuation

1. The terms, “students’ and “trainees” under the insurance policy refer to all full-time and part-time students in IVE campuses and all full-time and part-time trainees at Training Centers.
2. For industrial placement in Hong Kong, if the student is also employed by the company during his/her placement there, he/she is expected to be covered by the employer’s Employee Compensation Insurance.
3. Students / parents / guardians have the rights to claim against any third party (including employers and the Council) for damages or personal injuries if it is the negligence of a third party.
4. Students on placement are advised and encouraged to, if they prefer, take out additional/supplementary insurance coverage on their own for personal accidents, medical, travel, and/or third party liabilities. Please note to remind the insurance agents concerned that students are on placement and the insurance coverage should be arranged accordingly. (List of authorized insurers in Hong Kong is available from the Office of the Commissioner of Insurance at <http://www.info.gov.hk/oci/download/ins.pdf>. The Department is not responsible for any transactions between the insurers and students/parents/guardians.)

**Rely Slip**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I, parent/ guardian\* of |  | | (Name of student) enrolled in | | |
|  | | (Programme Title) at | |  | Campus have read |
| and under stood the attached information on the Insurance Coverage for Students on Industrial Placement provided by VTC and also understood that my son/ daughter/ ward \* must adhere to the standards in the Statement of Understanding of Industrial Attachment. | | | | | |

I agree/do not agree\* to allow my son/daughter/ward\* to join the industrial attachment scheme to be organized from \_\_\_\_\_\_\_\_\_\_\_\_\_ (DD/MM/YY) to \_\_\_\_\_\_\_\_\_\_\_\_\_ (DD/MM/YY).

|  |  |
| --- | --- |
| Name of Parent/Guardian\* : |  |
| Signature: |  |
| Date: |  |

*\*Delete as appropriate*

|  |  |
| --- | --- |
|  |  |

**Appendix 4 – Periodic Report (Student)**

**Periodic Report**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Schedule for Week dated from** |  | **to** |  |

|  |  |  |
| --- | --- | --- |
| **Date**  **(DD/MM/YY)** | **Work Done**  (*please provide brief description if there is a deviation from planned task*) | **No. of hours** |
|  |  |  |
| **Total hours accumulated (Calculated by Student)** | |  |
| **Verified by (Workplace supervisor’s Initial)** | |  |
| **Performance of the student during the reporting period (rate by Workplace supervisor)**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Very Dissatisfied** |  |  |  | **Very Satisfied** | | **1** | **2** | **3** | **4** | **5** | |  |  |  |  |  | | | |

1. **Summary of work**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| List new tasks you observed and/or performed, and/or new insights you gained this period.   |  | | --- | |  | |  | |  | |  | |  | | | |
|  | |
| Name of Student: |  |
| Signature: |  |
| Date: |  |

**Appendix 5 – Visiting Report (Academic supervisor) (Optional)**

(A copy of this report with Academic supervisor’s original signature shall be provided to the student after attachment.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **(A)** | **Details of site visit** | | | |
|  | Date: |  | Time / Length of Visit: |  |
|  | Venue: |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **(B)** | **Basic Information of Organization (Company, School, Association, etc.)** | | | | | | | |
|  | Organization Name: |  | | | | | | | |
|  | Name of Workplace supervisor: | |  | | Phone Number: | |  | | | |
|  | Attachment Period: | | (Start Date) |  | | (Finish Date) | |  | | |

|  |  |
| --- | --- |
| **(C)** | **Attachment Visit** |

1. Points to be discussed during the visit:

Orientation student has received on the job (safety issues, confidentiality, workplace expectations, information about the Organization, etc.)

Student’s performance (quality and quantity of work, attendance, punctuality, etc.)

Personalized Learning Plan tasks (update as necessary)

Student’s adjustment to the workplace (interpersonal relationships, boarding issues, remuneration issues, work routines, etc.)

Areas of concern and action to be taken (student; mentor; Attachment Coordinator; other)

What is going well; feedback given (student; mentor)

Other issues: (refer to weekly reports, job logs, etc.)

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(ii) Discussion with, and Feedback from, the Student

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(iii) Feedback from the Workplace supervisor

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(iv) Overall Comments / Action to be taken

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| --- |
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|  |
| --- |
| The Academic supervisor has discussed the contents of this report with the student. |
| Yes  Not Yet: Date to be discussed with the student is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (DD/MM/YY) |

|  |  |
| --- | --- |
| Name of Academic supervisor: |  |
| Signature: |  |
| Date: |  |

**Appendix 6 - Final Report (Company/Workplace supervisor)**

1. **Basic Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Organization: |  | | | |
| Address of Organization: |  | | | |
| Name of Workplace supervisor: |  | Job Title | |  |
| Contact Tel. No.: |  | Department : | |  |
| E-mail Address: |  | Fax No.: | |  |
| Name of Student: |  |  | |  |
| Attachment Period: | (Start Date) | | (Finish Date) | | |

1. **Comments about student**

(i) Please rate the Key Skills of the student during the attachment period:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Key Skills** | **Performance** | | | | | | | | | |
| 1  *(Not Effective)* | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10  *(Very*  *Effective)* |
| 1. Communication Skills  * Chinese (verbal and written) |  |  |  |  |  |  |  |  |  |  |
| * English (verbal and written) |  |  |  |  |  |  |  |  |  |  |
| 1. IT Skills  * PC Hardware installation |  |  |  |  |  |  |  |  |  |  |
| * Software installation |  |  |  |  |  |  |  |  |  |  |
| * Use of ICT/Coding/Data Analytics/AI/Cloud/IT Security/FinTech software |  |  |  |  |  |  |  |  |  |  |
| * Other Specific Skills (\_\_\_\_\_\_\_\_\_\_\_\_) |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| 1. Innovation-driven and design thinking idea/solution generation |  |  |  |  |  |  |  |  |  |  |
| 1. Problem Solving Skill  * Utilization of appropriate resources |  |  |  |  |  |  |  |  |  |  |
| 1. Personal Management Skills  * Work prioritization |  |  |  |  |  |  |  |  |  |  |
| * Work organization |  |  |  |  |  |  |  |  |  |  |
| * Ability to work independently |  |  |  |  |  |  |  |  |  |  |
| 1. Teamwork Skills  * Appropriate use of teamwork (division of responsibilities and cooperation) |  |  |  |  |  |  |  |  |  |  |
| * Maintaining a harmonious team spirit |  |  |  |  |  |  |  |  |  |  |
| 1. Other Skills |  |  |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | |

1. In what ways did the student contribute to the Organization during the attachment period?

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1. Please comment on the student's strengths and weaknesses.

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1. In your opinion, in what ways can this industrial attachment be improved?

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1. In your opinion, do you satisfy the student's performance?

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Very Dissatisfied** |  |  |  | **Very Satisfied** | | **1** | **2** | **3** | **4** | **5** | |  |  |  |  |  | |
| Because… |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Organization’s Chop |  | Date |  | Signature of Workplace supervisor |

**Appendix 7 - Evaluation Report (Student)**

**Student’s Evaluation Report**

(to be completed by Student at the end of industrial attachment)

**Discipline:** Information Technology

There are **12** Questions in this evaluation report.

1. **Campus:**

Please choose **only** **one** of the following:

IVE (Chai Wan)

IVE (Lee Wai Lee)

IVE (Morrison Hill)

IVE (Shatin)

IVE (Tsing Yi)

IVE (Tuen Mun)

|  |  |
| --- | --- |
| 1. **Programme Code:** |  |

1. **During your present programme of study, have you participated in industrial attachment?**

Yes (Please continue to answer Question 4 to 10.)

No (Thank you for your co-operation. This is the end of survey.)

1. **Student’s Evaluation of Industrial Attachment:**

Please rate the following aspects of your attachment(s) and choose the appropriate response for each item.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 非常不同意  Strongly disagree | | |  | | | | | | 非常同意  Strongly agree | | | |
|  | (1) | (2) | | (3) | (4) | (5) | (6) | (7) | | (8) | (9) | (10) |
| 4.1 實習計劃達到我的期望  The attachment met my expectation. |  |  | |  |  |  |  |  | |  |  |  |
| * 1. 教學部門給予我充分的支援   Your teaching department provided you with adequate support. |  |  | |  |  |  |  |  | |  |  |  |
| * 1. 實習的機構/顧主給予我充分的支援   Your received adequate support from the attached company. |  |  | |  |  |  |  |  | |  |  |  |
| 4.4 該實習非常有用  The attachment is very useful. |  |  | |  |  |  |  |  | |  |  |  |
| 4.5 該實習的時間長短適中  The duration of the attachment is appropriate. |  |  | |  |  |  |  |  | |  |  |  |
| 4.6 實習前的準備課堂非常有用  The pre-attachment preparation sessions are useful. |  |  | |  |  |  |  |  | |  |  |  |

1. How did your workplace supervisor help you during the attachment?

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1. Which part of the attachment scheme did you like most?

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1. What aspects of the attachment scheme could be improved?

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1. Self-evaluation by Student:

Please indicate your own improvement in the following key skills after you completed the industrial attachment and choose the appropriate response for each item.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 全無改進  No improvement | | | | |  | |  | |  | |  | |  | |  | |  | | 很大改進  Great improvement | | | | | | |
|  | (1) | (2) | | (3) | | | | (4) | | (5) | | | | (6) | | (7) | | | | (8) | | (9) | | (10) | |
| 8.1 溝通能力  Communication skills |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.2 資訊管理  Managing information |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.3 數字運用  Using numbers |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.4 思考及解難  Thinking and solving problems |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.5 表現正面態度及行為  Demonstrate positive attitudes and behavior |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.6 承擔責任  Be responsible |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.7 適應能力  Be adaptable |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.8 持續學習  Learn continuously |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.9 安全工作  Work Safely |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.10 與其他人合作  Work with others |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
| 8.11 積極參與工作  Participate in projects and tasks |  |  | |  | | | |  | |  | | | |  | |  | | | |  | |  | |  | |
|  |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |  |

1. What was the most valuable experience you had in the attachment?

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1. What was the most difficult part of the attachment?

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1. What was your greatest strength identified during the attachment?

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| --- |
|  |
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1. What was your greatest weakness identified during the attachment?

|  |
| --- |
|  |
|  |
| *End of the evaluation report!* |

**Appendix 8 – Industrial Attachment Certificate (Template)**

****

**SAMPLE**

**Appendix 9.1 – Personal Information Collection Statement (Student)**

**PERSONAL INFORMATION COLLECTION STATEMENT**

**Purpose of collection**

The personal data provided in this form and any other information (the “Information”) that may be provided for the purposes of the application for “Future-ready Talent Incubation Programme” (the “Programme”) will be used by Vocational Training Council (“VTC”), JPMorgan Chase Foundation (the “JPMorgan”) and their agents/contractors for one or more of the following purposes and any directly related purpose, in respect of the Programme:

1. to consider, process and administer your application, and serve any directly related purposes, e.g. processing and administering the programme (if granted), and to communicate with you.
2. to inform you of or invite you to events, activities and programmes of or organised by the VTC or by the JPMorgan (if granted).
3. to compile statistics and conduct research.
4. any other purposes as may be required, authorised or permitted by any law and/or regulation.

It is voluntary for you to provide your personal data to the VTC. If you fail to supply any of the Information required by this form, your application may not be processed.

Records of unsuccessful candidates will be destroyed when no longer required.

**Access to personal data**

Except where there is an exemption provided under the Personal Data (Privacy) Ordinance (Cap. 486), you have the right to request access to and correction of your personal data provided in this form when the data have not been erased. Your right of access includes the right to obtain a copy of your personal data provided in this form subject to payment of a fee.

**Privacy Policy Statement**

Please visit website: <http://www.vtc.edu.hk/html/en/privacy.html> for VTC’s policies and practices in relation to personal data and the Personal Data (Privacy) Ordinance in Hong Kong.

**Request and enquiry**

Your request for access to personal data or enquiry regarding personal data privacy policy should be addressed to:

IT Discipline Planning Office

Room 301, Academic Block, 30 Shing Tai Road, Chai Wan

Re: Future-ready Talent Incubation Programme

[E-mail: itdpo@vtc.edu.hk](mailto:E-mail:%20itdpo@vtc.edu.hk)

**Declaration by the Applicant**

I declare that the Information provided in this application is accurate, true and complete to the best of my knowledge. I am aware that VTC will rely on such Information and consent to VTC relying on the Information provided by me to determine my eligibility for the Programme to be offered to me.

I confirm that I have carefully read and fully understand the “Personal Information Collection Statement” (the “PICS”) set out above. I accept the PICS and the purposes of use of the Information set out in it.

I authorise and consent to VTC releasing my personal data to the JP Morgan in order for it to use such information for such purposes set out in the PICS.

Signature of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix 9.2 – Evaluation for Student’s Performance on Latest Technology (Workplace Supervisor)**

(i) Does this industrial attachment improve student’s advance technical skills and benefit your company/department?

*Please indicate by* 🗹 *in the following boxes (can tick more than one when appropriate)*

Skills Improvement of Student

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Data Analytics |  | AI / Machine Learning |  | Cloud Computing |  | Smart/Intelligence Applications |
|  | Immersive and Digital Media Technologies |  | Cybersecurity |  | Financial Technology |  | Other \_\_\_\_\_\_\_\_\_\_\_\_ |

Benefit to Company/Department

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Injection of new ideas in the workplace |  | Engaging a pool of work-ready recruits |  | A deeper understanding of young employee |
|  | Having dedicated resource to complete a specific task |  | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

(ii) Will you recommend the student to your Organization for full-employment?

Yes

Not in this period of time due to staffing/budgetary constraint. But, will highly recommend the student to enter the relevant profession/industry immediately after graduation.

No, because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Organization’s Chop |  | Date |  | Signature of Workplace Supervisor |
| <Academic Supervisor’s name> |  |  |  |  |
| Endorsed by |  | Date |  | Signature of Academic Supervisor |

**Appendix 9.3 – Summary of Problem-based Industrial Project (Student/Academic Supervisor)**

|  |  |
| --- | --- |
| **Project Title**   |  | | --- | |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Abstract**   |  | | --- | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |

**Streams Related**

*Please indicate by* 🗹 *in the following boxes (can tick more than one when appropriate)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Data Analytics |  | AI / Machine Learning |  | Cloud Computing |  | Smart/Intelligence Applications |
|  | Immersive and Digital Media Technologies |  | Cybersecurity |  | Financial Technology |  |  |

**Assessment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Stage** | **Initial (10%)** | **Interim (30%)** | **Project Management (10%)** | **Final (50%)** |
| **Assessment** | **Continuous Assessment** | | | **End-of-Module Assessment** |
| **Grade** |  |  |  |  |
| **Final Grade** | | | |  |

*(Detail marking can be referred the project marksheets)*

**Appendix 9.4 – Continuous Professional Development Record (Student)**

**Continuous Professional Development Record**

|  |  |  |
| --- | --- | --- |
| **Date**  **(DD/MM/YY)** | **Name of the Training / Seminar** | **No. of hours** |
|  |  |  |
| Total hours accumulated : | |  |

*(Training and Seminar should be related to Career Coaching or Innovation & Digital Technology)*

**Appendix 9.5 – One-year Employment Record (Academic Supervisor)**

|  |
| --- |
| **One month after graduation** |
| Summary of status |
| |  | | --- | |  | |  | |  | |  | |  | |  | |
| **Six months after graduation** |
| Summary of status |
| |  | | --- | |  | |  | |  | |  | |  | |  | |
| **One year after graduation** |
| Summary of status |
| |  | | --- | |  | |  | |  | |  | |  | |  | |

*Information required :*

|  |  |
| --- | --- |
| *Full-time Employment*   * *Industry (e.g. FinTech / IT Security etc.)* * *Company name* * *Company Categories (e.g. Corporation / SME / NGO / Government etc.)* * *Contract type (e.g. Permanent / Contract-base / Project-base)* * *Salary* * *Work duties – relevancy to the 6 career streams* * *Details of employment terms (e.g. other fringe benefits, training, work flexibility, etc.)* | *Start-up a new business in any of the 6 career streams*   * *Industry (e.g. FinTech / IT Security etc.)* * *Company name and Business nature* * *No. of employee* |
| *Further study*   * *Name of Institution* * *Name of Faculty and Programme* * *Relevancy between the programme of further study and higher diploma* |