

J-1 VISA EXCHANGE VISITOR FINAL EVALUATION FORM

As a participating Trainee/Intern in the J-1 Visa Exchange Visitor Program under sponsorship of the IACC, you are required to complete this evaluation pertaining to your J-1 Visa Training Program. This evaluation must be completed two times, once at the midpoint of your training program and at the end of your training program, prior to your departure from the United States.

All forms can be submitted to pike@italchamber.org. Please include in the subject line, the following information:

- Host Organization Name, your name, Category (indicate Trainee or Intern), Evaluation Type (Midpoint)*

Exchange Visitor Program Category:

- ☐ Intern
☐ Trainee

Exchange Visitor Name: _____

Host Organization Name: _____

Program Supervisor Name: _____

Program Start Date: ____/____/____ Program End Date: ____/____/____

Number of phases as written on the TIPP (DS-7002): _____

Which phase are you currently carrying out? _____

1. Please indicate the following pertaining to your training program:

	Yes	No
Up to this point, my experience has met the expectations of the training program, as written in the TIPP.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, I have made progress on any areas of concern or difficulty related to tasks/duties assigned to me during my training program, as written in the TIPP.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, with the assistance of the Host Organization, I have made efforts to assimilate into the United States culture and surrounding area.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, I have had little/to no issue adapting to the work environment of a US Company.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, I have been receptive to and proactive in seeking out, advice and guidance from the Supervisors regarding how to perform to the best of my abilities.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, I have learned significant skills and techniques directly from the Supervisors on a daily basis, as written in the TIPP.	<input type="checkbox"/>	<input type="checkbox"/>
Up to this point, I have been observed daily and evaluated at the end of each phase by the Supervisor, as written on the TIPP.	<input type="checkbox"/>	<input type="checkbox"/>

For all additional comments, please use the lines below:

2. What is/are the most important element(s) that you have gained from being exposed to the U.S. culture, the training location and the local community?

3. Please describe the tasks that you are responsible for as part of your training program, and how you are supervised:

4. Thus far, would you recommend the J-1 Visa Exchange Visitor Program to other foreign students/young professionals looking to participate in an international training experience?

Yes: _____ No: _____

If no, please indicate why below:

5. I confirm, my J-1 Visa Sponsor, *The Italy-America Chamber of Commerce* effectively carried out the following responsibilities:

	Yes	No
Monitored my training program effectively to ensure I was being trained effectively and efficiently	<input type="checkbox"/>	<input type="checkbox"/>
Provided me with all the necessary information pertaining to my J-1 Visa, before, during, and after my training program	<input type="checkbox"/>	<input type="checkbox"/>
Was both responsive and attentive to any questions, issues, or problems that may have arisen during my training program	<input type="checkbox"/>	<input type="checkbox"/>
Assisted me in adapting to the United States culture and customs	<input type="checkbox"/>	<input type="checkbox"/>

For all additional comments, please use the lines below:

I, _____, confirm that I have answered this evaluation form truthfully and to the best of my ability.

Exchange Visitor Signature: _____

Date of Submission: ____/____/____