**INTERNSHIP RESULT ASSESSMENT FORM**

ID student: K194060850

Full name: NGUYEN DANG KHOA

Name of internship company: KYANON DIGITAL COMPANY LIMITED

Company address: 294-296 Truong Sa, Ward 2, Phu Nhuan District, HCMC

Company phone: (+84) 283 5171 080

Full name of company representative: LE QUOC ANH TUAN

Position: Director Phone:  
Internship period: From 10-31-2022 to: 01-31-2023

*\* Please evaluate* ***by marking X*** *in the classification columns of the following table.*

*Notes:*

***Type A: 2 points****;* ***Type B: 1,5 points***

***Type C: 1 point****;* ***Type D: 0,5 point***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Content of assessment | Rating | | | |
| **A** | **B** | **C** | **D** |
| **1. Attitude and discipline** | | | | |
| 1. Implement company’s policies |  |  |  |  |
| 1. Comply with working hours |  |  |  |  |
| 1. Communication attitude with colleagues and associates |  |  |  |  |
| 1. Property protection consciousness |  |  |  |  |
| 1. Be active at work |  |  |  |  |
| **2. Advanced skills and qualifications** | | | | |
| 1. Meet job requirements |  |  |  |  |
| 1. The spirit of learning and improving professional qualifications |  |  |  |  |
| 1. Be innovative and dynamic at work |  |  |  |  |
| **3. Internship results** | | | | |
| 1. Have practical application products that benefit the company |  |  |  |  |
| 1. The level of completion of the internship |  |  |  |  |

**COMMENTARY FORM OF THE INTERNSHIP COMPANY**

……….., Date

**CONFIRMATION OF THE COMPANY**

*Sign, write full name and stamp*

**INTERNSHIP RESULT ASSESSMENT FORM**

ID student:

Full name:

Name of internship company:

Company address:

Company phone:

Full name of company representative:

Position: Phone:   
Internship period: From to:

*\* Please evaluate* ***by marking X*** *in the classification columns of the following table.*

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**COMMENTARY FORM OF THE INTERNSHIP COMPANY**

……….., Date

**CONFIRMATION OF THE COMPANY**

*Sign, write full name and stamp*