**PRACTICUM OVERALL PERSONAL REFLECTION**

|  |  |
| --- | --- |
| Student Name | **LASTNAME, FIRSTNAME MI.** |
| Section |  |
| Personal Email Address | **NotHAU** |
| LinkedIn Profile Link | **There’s a way to have your link fixed there** |
| Portfolio Link |  |
| Name of Immediate Supervisor |  |
| Title/Position of Supervisor |  |
| Supervisor’s Email Address |  |

**Company Name** (in paragraph form)

* Company Profile / Brief History
* Mission / Vision Statement
* Organizational Chart of your company’s department

**Roles and Responsibilities** (in paragraph form)

* Names and titles/positions of the employees in my department (include their roles in the organization)
* My Duties and Responsibilities (include the summary of the activities done in the office)
* What are the different system applications (enumerate) they use and you used during OJT?

**An Evaluation of my Training** (in paragraph form)

* Describe your work environment.
* Describe the different office equipment / devices in your department.
* Identify and describe the learning experiences / skills acquired during your practicum.
* What were the challenges/problems had you encountered during your practicum and how did you solve them?
* Do you prefer to work alone or with a team?
* Minimum 5 Photos (less quarter size only) with caption taken in your workplace/workstation at home with short description. You may also provide the works/projects done.

**Observed Organizational Values** (in paragraph form)

* Interpersonal Relationships / Working relationship with co-workers.
* Teamwork
* Quality of Service Delivered
* Attendance / Punctuality
* Personal Grooming

Provide your favorite verse from your weekly journal and your favorite quote.

**Recommendations/Feedback** of the student on the school’s Practicum Training Program.

***Format*** *(delete this part once accomplished)*

Title: Century Gothic, 11, Bold

Bold: Century Gothic, 10, None

Spacing: 1.5   
Margins: 1 inch in all sides,   
Paper size: Letter Size (8.5 x 11 only)

**SUMMARY OF APPROVED WEEKLY HOURS**

Follow the standard week format of your journal submission on the table below.

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| **Date From** | **Date To** | **Number of Hours** | **Remaining Hours** |
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**FIRSTNAME MI. LASTNAME FIRSTNAME MI. LASTNAME**

Name & Signature of Student SOC Practicum Coordinator