**San Beda College Alabang**

**College of Arts and Sciences**

**Student Internship Program**

**Internship Completion Report and Reflection**

1. **Student Information**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Internship Information**

**Name of Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Professor-in-Charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Hours: \_\_\_\_\_\_\_\_\_\_\_ Official Schedule (Day and Time): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Student’s Internship Report and Reflection**

Use a separate paper to write the following information for your internship report and reflection. Your report should be computerized and justified, and use Arial font, size 11 with 1.5 line spacing.

Attach to this your certificate of completion and weekly reports.

1. **Company Profile**

Write the background, nature of business and organizational chart of the company.

1. **Job Description**

List and describe your tasks or functions and responsibilities in the position given to you.

1. **Reflection: Summary of Learning Experience**

Provide an overall description and summary of your learning experience. Include new knowledge or skills acquired, challenges encountered and ways you rose above such situations.

1. **Internship Program Evaluation**

The purpose of this evaluation is to provide opportunity for an honest feedback of the

Student Internship Program and its continuous improvement.

Please answer the following questions about your internship experience in the **company**.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Evaluation on the Company** | **Yes** | **No** | **Undecided** |
| 1. Would you work for this company supervisor again? |  |  |  |
| 1. Would you work for this company again? |  |  |  |
| 1. Would you recommend this company to other   Students? Why or why not? |  |  |  |

Please evaluate the **Professor-in-Charge** and the **Student Internship Program** on the

following areas by giving the appropriate rating:

5-Excellent 4-Very satisfactory 3-Satisfactory 2-Moderately satisfactory 1-Needs improvement

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Evaluation on the Professor-in-Charge** | **1** | **2** | **3** | **4** | **5** |
| 1. Adequacy of supervision and visitation |  |  |  |  |  |
| 1. Clever discussion of the result of the internship evaluation |  |  |  |  |  |
| 1. Helpfulness and approachability |  |  |  |  |  |
| **Comments and Suggestions:** | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Evaluation on the Student Internship Program** | **1** | **2** | **3** | **4** | **5** |
| 1. Provision of orientation and seminar |  |  |  |  |  |
| 1. Opportunity to gain professional experience relevant to my knowledge and skills through the internship program |  |  |  |  |  |
| 1. Help extended by the SIP Office |  |  |  |  |  |
| **Comments and Suggestions:** | | | | | |

**D. Implementation of the Student Internship Program**

|  |  |  |
| --- | --- | --- |
| **Issues and Concerns You Encountered** | **Solutions the SIP Office and/or Company Provided** | **Your Recommendations** |
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