

Company Declaration and Evaluation

The company:

Company name:			
Address:			
Company supervisor:	Name:		
	Position:		
	E-mail:		
	Phone:		

Declares that following bachelor student:

Name:			
Address:			
Social security no.:		Student no.:	

Has performed an internship as per agreement:

Date of agreement:	
Days of acceptable non-attendance:	
Days of non-acceptable non-attendance:	

The company's evaluation of the internship (1 is not-acceptable, 2 is below middle, 3 is middle, 4 is above middle and 5 is excellent):

The students' knowledge and skills	
The students' ability to solving problems	
The students' ability to adopt new knowledge	
The students' motivation	
The students' social competences and ability to work in teams	
The students' ability to meet agreements and time limits	
Other comments:	

Hereby confirmed by:

Company supervisor:		Date:	
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