

**FORSYTH TECHNICAL COMMUNITY COLLEGE
COOPERATIVE EDUCATION
ON-SITE VISITATION WORKSHEET**

Date of Visit: _____

Student Name: _____
Last First MI.

Employer: _____

Address: _____

Site Supervisor Name: _____

Co-op Instructor Name: _____

I. Interview between site supervisor and co-op instructor:

a. Does this co-op student fully understand the assigned responsibilities? Yes No
(If "no", please explain.)
Comments:

b. Does this co-op student have the knowledge to competently perform the assigned responsibilities? Yes No (If "no", please explain.)
Comments:

c. Has this co-op student helped to meet the needs of your department? Yes No
(If "no", please explain.)
Comments:

d. Rate this co-op student's overall job performance so far.
 Very Good Good Fair Poor Very Poor
If rated "Very Good" or "Very Poor", please explain.
Comments:

Site Supervisor Signature

Date