



DISTRICT SCHOOL BOARD OF NIAGARA Cooperative Education Program

Student Assessment

| | |
|----------------------------|-------------------------|
| Student Name: _____ | Midterm Due Date: _____ |
| Organization's Name: _____ | Final Due Date: _____ |
| Supervisor: _____ | Teacher: _____ |

Please complete the following Cooperative Education Student Assessment.
Your assessment ratings should be in line with what you would expect of
an **entry level** worker in your organization.

Placement Specific Expectations & Assessment

Please rate the students' performance with respect to placement specific expectations by placing a checkmark ✓ in the appropriate column.

| Placement Specific Expectations To be developed by the employer/supervisor and the Cooperative Education teacher based on 3 – 5 specific tasks expected to be performed by the student throughout the current coop placement. | Midterm | | | Final | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Below Expectation | Meets Expectation | Above Expectation | Below Expectation | Meets Expectation | Above Expectation |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Student Strengths: | | | | | | |
| | | | | | | |
| Next Steps for Improvement: | | | | | | |
| | | | | | | |

Employability Skills Assessment

Please rate the student's performance with respect to their demonstration of employability skills by placing a checkmark ✓ in the appropriate column.

| Employability Skills | Midterm | | | Final | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Below Expectation | Meets Expectation | Above Expectation | Below Expectation | Meets Expectation | Above Expectation |
| Demonstrates ability to work independently | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates effective health and safety practices | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates willingness and ability to work cooperatively with others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates ability to communicate effectively | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates effective organizational and time management skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates punctuality, daily attendance and reports absences as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates ability to complete tasks assigned and demonstrates self-motivation and initiative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates a positive attitude when approaching new learning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates ability to complete and submit weekly logs on time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates respect for ideas, decisions and opinions of others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates ability to listen attentively and ask questions for clarification | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates ability to think critically and adapt to change as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Midterm | Final |
|--|--|
| Comments: please provide some specific statements regarding the student's performance in this placement | Comments: please provide some specific statements regarding the student's performance in this placement |
| This evaluation has been discussed with the student. <input type="radio"/> Yes <input type="radio"/> No | This evaluation has been discussed with the student. <input type="radio"/> Yes <input type="radio"/> No |
| _____ <i>Employer/Supervisor Signature</i> _____ <i>Date</i> | _____ <i>Employer/Supervisor Signature</i> _____ <i>Date</i> |
| _____ <i>Student Signature</i> _____ <i>Date</i> | _____ <i>Student Signature</i> _____ <i>Date</i> |