



## Midterm Evaluation – Co-op Student

**Please submit this form to:**

Project & Work Integrated Learning Coordinator

[SENRS-WIL@flemingcollege.ca](mailto:SENRS-WIL@flemingcollege.ca), T: 705-324-9144 x 3030, Toll-Free: 1-866-353-6464 x 3030

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

**Employer Name:** \_\_\_\_\_ **Program Name:** \_\_\_\_\_

Please complete the following evaluation of your co-op employer. **Your answers are confidential and will not be shared with your employer.** This form should be completed **after** your Supervisor has shared the Employer Midterm Evaluation with you.

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1. Do you feel that your Supervisor’s Midterm Evaluation is a fair evaluation of your job performance? Explain why you feel that it is fair, or why you do not feel that it is fair. If your Supervisor has not provided you with this feedback, please indicate this.

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2. Is this co-op work term meeting your goals? Is it providing opportunity for you to apply the knowledge and skills obtained in your program of study? Be specific about the knowledge and skills you are applying.

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3. What do you plan to do in the second half of your co-op work term to continue to enhance your skills and meet your goals?

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4. What has been the highlight of your learning to-date? What have you found to be most interesting?

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5. Overall, how do you rate your co-op employer?

Unsatisfactory – I would not recommend this employer to future students

Marginal – I wish I had chosen a different placement

Very good – I have enjoyed working for this employer

Outstanding – excellent organization to work with

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Briefly explain why you have chosen this rating:

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**Additional Comments (please use an additional sheet if necessary):**

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