Student Evaluation of Work-Based Learning

Rate your agreement with the following statements:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Somewhat Disagree | Neither Agree Nor Disagree | Somewhat Agree | Strongly Agree |
| 1. **Support**: I received everything I needed to be successful in my work. |  |  |  |  |  |
| 1. **Safety**: I was safe at the worksite. |  |  |  |  |  |
| 1. **Skill Development**: I gained or improved work skills. |  |  |  |  |  |
| 1. **Social Capital Development**: I received adequate opportunity to build relationships with industry and community professionals. |  |  |  |  |  |
| 1. **Career Preparation**: The work-based learning experience helped me plan and prepare for my future career. |  |  |  |  |  |
| 1. **Overall**: I would recommend this work-based learning opportunity to my peers. |  |  |  |  |  |
| 1. **Improvements**: Explain which aspects of the work-based learning opportunity could be improved for future students. | | | | | |
|  | | | | | |
| 1. **Value**: Explain which aspects of the work-based learning opportunity were the most valuable to you. | | | | | |
|  | | | | | |