

MASTER OF SCIENCE IN TELECOMMUNICATIONS ENGINEERING

Name:	Surname:
ID number:	Email address:
Host Company:	Company tutor:
Academic tutor:	
Internship start date:	Internship end date:

<p>A) Host company type:</p> <ul style="list-style-type: none"> <input type="radio"/> Industry/trade/crafts <input type="radio"/> Credit and insurance <input type="radio"/> Professional offices <input type="radio"/> Municipality/province/region/public institution <p>B) How was the traineeship carried out?</p> <ul style="list-style-type: none"> <input type="radio"/> Fixed assignment to a specific activity <input type="radio"/> Fixed assignment to more than one activity <input type="radio"/> Rotation among multiple activities <input type="radio"/> Whole company's activities or a sector of the same <p>C) The traineeship preparation by the University was:</p> <ul style="list-style-type: none"> <input type="radio"/> Not sufficient <input type="radio"/> Just sufficient <input type="radio"/> Good <input type="radio"/> Very good <p>D) The inclusion of the student in the company/institution was:</p> <ul style="list-style-type: none"> <input type="radio"/> Impossible <input type="radio"/> Difficult <input type="radio"/> With some problems <input type="radio"/> Easy <p>E) The academic tutoring action was:</p> <ul style="list-style-type: none"> <input type="radio"/> Ineffective <input type="radio"/> Partially effective <input type="radio"/> Effective <input type="radio"/> Very effective 	<p>F) Has the company/institution had problems with hosting the student?</p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> Many <input type="radio"/> Just a few <input type="radio"/> None <p>G) Concerning the assigned tasks, the student preparation resulted:</p> <ul style="list-style-type: none"> <input type="radio"/> Not sufficient <input type="radio"/> Just sufficient <input type="radio"/> Good <input type="radio"/> Very good <p>H) Did the student encounter any problem during the internship?</p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> Many <input type="radio"/> A few <input type="radio"/> None <p>I) What overall assessment does the company/institution express about the experience gained as a guest by the trainee?</p> <ul style="list-style-type: none"> <input type="radio"/> Useless <input type="radio"/> Not very useful <input type="radio"/> Useful <input type="radio"/> Very useful
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Date:

Host company/institution:

Company tutor signature: