

Students who have succeeded in obtaining Industrial Training must complete and submit this form to the CSE Student Office, Ground Floor, K17, **within 30 days of completing the training.**

Students are reminded that 60 days of Industrial Training must be completed prior to the last day of session in their final stage of the program for them to be eligible for graduation. It may be possible to submit a late report, however this may delay graduation by up to 6 months.

**SECTION 1 – STUDENT INFORMATION (to be completed by student)**

STUDENT NUMBER:

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FAMILY NAME: \_\_\_\_\_ GIVEN NAME/S: \_\_\_\_\_

PROGRAM: \_\_\_\_\_ PLAN: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

PROGRAM STAGE:  2  3  4  5      When do you expect to complete? Session: \_\_\_\_\_ Year: \_\_\_\_\_

Have you completed all of your degree requirements (except for IT)?  Yes  No

Are you currently enrolled in your final session of courses in order to complete your degree requirements?  Yes  No

**SECTION 2 – SUBMISSION CHECKLIST**

Please ensure that you have completed and are submitting all of the following (please note that if you have been granted any exception to the following submission criteria you must attach email approval from the IT Co-ordinator):

**For submission to the CSE Student Office please collate all of the following documents together in the following order (eg. Part 1 at the front and Part 4 at the back)**

Part:	IT REPORT Documents
1	<input type="checkbox"/> Employment Record (this document)
2	<input type="checkbox"/> Copy of Payslip <i>or</i>
	<input type="checkbox"/> Employment Contract
3	<input type="checkbox"/> Student's Evaluation
4	<input type="checkbox"/> 2000 Word Written Report

**OFFICE USE ONLY**

**CSE Student Office Counter Staff Member to Complete:**

I have checked that all

- 4 document parts have been included and submitted in the specified order
- 5 sections of questions completed in full

**Signed by CSE Student Office Counter Staff:**

\_\_\_\_\_

Date Stamp

I agree that the Information I have provided in my IT Report is accurate and true to the best of my knowledge:

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 3 – STUDENT'S COMMENTS ON EMPLOYER'S REPORT**

Note: this section should be completed **after** the employer has completed the Employer's Report (over page). Comments will remain confidential within CSE.

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**SECTION 4 – EMPLOYMENT DETAILS (to be completed by the student's company supervisor.)**

Student's Name: \_\_\_\_\_ Position held by student: \_\_\_\_\_

Employer's Name (Company): \_\_\_\_\_

Address: \_\_\_\_\_

Employment commenced on: \_\_\_\_\_ (dd/mm/yy) Full-time  or Part-time  - If Part-time: number of days worked per week: \_\_\_\_\_

Employment will terminate on/ or terminated on : \_\_\_\_\_ (dd/mm/yy) or Ongoing Employment:  (Full time  or Part time )

No. of full working days worked: \_\_\_\_\_ No. of days absent (incl.holidays): \_\_\_\_\_ Reason for days absent: \_\_\_\_\_

If employment has ceased, what was the reason for the termination of employment: \_\_\_\_\_

Please release my company details to other final year students for Industrial Training purposes:  Yes  No

**SECTION 5 – EMPLOYER'S REPORT (to be completed by the student's company supervisor.)**

How much did the student require:	Indicate One			
	None	Little	Average	Excessive
Direction on new tasks?				
Supervising whilst tasks were in progress?				
Intervention when things didn't go according to plan?				
Ongoing encouragement and attention?				

How well did the student:	Indicate One			
	Not Applicable	Ineffectively	Satisfactorily	Effectively
Recover from setbacks?				
Learn from having a setback?				
Work as part of a team?				
Get responses and co-operation from				
Take directions?				
Define problems?				
Find innovative solutions?				
Handle multiple tasks?				

How good was the student's:	Indicate One			
	Above Average	Average	Below Average	Unsatisfactory
Technical ability?				
General attitude?				
Oral communication skills?				
Written communication skills?				

Comments: \_\_\_\_\_

I certify that the above named student was a **PAID\*** employee of the stated company for the duration indicated in Section 4 of this document.

Student's Company Supervisors Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Designation: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**\* Unpaid employment will not be considered for Industrial Training**