



REGENT UNIVERSITY
COLLEGE OF SCIENCE AND TECHNOLOGY

REGENT INDUSTRIAL PLACEMENT EXPERIENCE



Email: admissions@regent.edu.gh
Phone: +233-302-972850 / +233-302-972851
Mobile: +233-503-030999 / +233-266-839961

Regent Campus, No.1 Regent University Avenue, McCarthy Hill,
off the Mallam-Kasoa-Winnaba Highway, Accra-Ghana
f regentghana t regentghana
regentghana regentghananet1



PRACTICAL EXPERIENCE RECORD

GREEN BOOK

Internship Policies & Logbook

The Director, Career Advisory and Employability Service – Regent University of Science and Technology
P. O. Box DS 1636, Dansoman, Ghana - Email: career.advising@regent.edu.gh

This journal shall be kept by the student and shall serve as evidence of the Attachment times.
Completing this Book is a major requirement for graduation.

Practical Experience Record (PER)
Personal Details

Name: _____

Registration No: _____

School: _____

Programme of study: _____

Society: _____

Mobile Phone: (a) _____ (b) _____

E-mail Address 1 _____

E-mail Address 2 _____

If found, please return to:

Regent University College of Science and Technology
P. O. Box DS 1636
Dansoman, Accra, Ghana

Student Mentorship

<i>Academic Year</i>	<i>Name of Adviser</i>	<i>Signature of Adviser</i>
First Year		
Second Year		
Third Year		
Fourth Year		

Table of Contents

1. Green Book	4
2. Internship Policies Procedures	8
3. Life Game Plan	13
4. Motivation and inspiration from others	23
5. Research Seminar Evaluation Report	27
6. Critical & Creative Thinking Seminar Evaluation Report	30
7. Business Plan Assessment Report	32
8. Seminars/Workshops/Public Service	35
9. Occupational Skills & Employment skills	39
10. Health and Safety	43
11. Language Proficiency	44
12. Attachment /Internship	46
13. First Year Attachment	47
14. Second Year Attachment	56
15. Third Year Attachment	69
16. Forth Year Attachment	78
17. Appendix 1 - Game Plan	91
18. Appendix 2 - Daily Rotation	94
19. Notes	95
20. Final Evaluation of the Green Book	103

A. Green Book

1.0 Induction

1.1 The Green Book is a Practical Experience Record (PER) designed for students in the Schools of Science and Schools of Engineering. The main purpose of the Green Book is to implement, monitor and fulfill the requirements or various courses required for graduation.

1.2 It is important to remember that examination success is only one aspect of qualifying as a University graduate in Regent University of Science and Technology. The University will expect that, by the time you register for graduation you have obtained the appropriate training, practical experience and fulfill all relevant requirements.

1.3 This is the reason why you are required to record your practical experience and other required activities in this Green Book and complete the Summaries Section of it with your registration for graduation. The Summaries Section must be endorsed by your University Adviser and the Director of Career Advisory and Employability Service.

1.4 The Green Book enables you to build up a complete and accurate summary of the skills and expertise you acquire in different areas of work during your training and to have these verified as you go along, rather than retrospectively when you may even have changed your job. You will find that the Green Book includes both a Diary Section in which you record, at regular intervals, details of the work you have been doing, and a number of Summary Sheets.

1.5 You are expected to fulfill one of these on completion of an assignment or whenever you move on to a different work; they summarize for the University the Experience you have obtained in each job placement and will form part of your application for graduation. Details about how to complete the Green Book are given below.

1.6 The University accepts that the Experience which you obtain will depend on the size, nature and structure of the organization which employs you and that you may work in fewer or more areas than other students. Your program of study covers a wider range of courses than you are likely to encounter during your training and it will not always be possible for you to arrange for your practical experience to be in the same area as the courses you are currently studying.

1.7 Nevertheless, you should look on your practical experience as reinforcing the program of study which you are undertaking for developing your professional competence. For this reason, you should try to obtain as wide a range of experience as possible, taking practical responsibility for work and participating in as many of the main aspects of your area of specialization carried on within your organization as you can. You should also try to arrange to spend longer periods in some areas rather than in others so that your broad training and experience is balanced by more detailed knowledge of one or two aspects of your specialization.

1.8 This will enable you to make a worthwhile contribution to the work of your organization, and will help to ensure, that by the time you qualify, you will have the managerial, technical

knowledge and skills appropriate for someone embarking on a professional career.

1.9 In addition to acquiring technical and practical expertise, you will be expected to show that you have developed personal skills which will enable you to communicate information effectively, both orally and in writing. You will also be able to plan, work, to exercise judgment and to motivate and control others and to understand the importance of professional attitudes integrity, independence, impartiality and objectivity.

1.10. If you follow the experience requirements set out in the PER, maintain it carefully and make sure that your employer confirms the details which include in the Summary Sheets, you should have no difficulty in acquiring the experience and skills, both technical and personal, appropriate for graduation.

1.11. Your completed Green Book should demonstrate that during your training, you have gradually taken on work of increasing responsibility. This is important because Regent University of Science and Technology graduates are supposed to be generally recognized by potential employers as people well-qualified to take on superior roles in all aspects of professional life.

2.0 Other Areas which may contribute towards the Experience Requirements for Graduation

2.1 Already Acquired

Already acquired experience is acceptable provided that it can be verified; covers areas of study relevant to the student program of study and specialization and is properly supervised. Such experience should not constitute more than a small proportion of the required period of approved practical experience.

2.2 Temporary Work

Daily /weekly temporary work is not acceptable.

2.3 Self-Employment

Experience obtained while self-employed does not normally constitute approved experience. However, a number of practicing firms employs trainees on a self-employed basis. This experience is acceptable provided the University-approved supervising officer is able to endorse it.

2.4 Small Companies

A number of students are employed in small organizations where there is no qualified supervising staffing the students' area of specialization. Experience gained in this way should be capable of verification.

2.5 Notes to Employers about the Green Book

2.5.1 Applicants for graduation must in addition to passing the examinations, provide evidence of having obtained the relevant practical experience. Student of the University are expected, therefore, to maintain records of the experience which they obtained using the Practical Experience Record provided by the University. Each student's experience must be verified by his or her employer. We request your cooperation in encouraging your trainees to keep their records up-to-date, in reviewing their progress and in confirming their experience on the summary sheets.

2.5.2 Please add any comments you have about the student's progress both in terms of their skills and competence in the area of their job description and the extent to which they have developed a professional approach to their work.

2.6 Notes to Students on the Completion of the Green Book

2.6.1 Education and examination

You should maintain a record of courses of study undertaken, examinations sat, and the certificates obtained. As a student of the University you will be expected to ensure that your knowledge of your area of study is kept up to date through private study or attendance at courses. It is to help you develop the habit of recording such study that the section on course attendance has been included. You should enter

details of all courses you attended including those organized by your employer and the University.

2.6.2 *Diary*

(a) You are expected to record at regular intervals (at least once a month) details of the work you undertake. The Diary should include information on all the tasks which you yourself have undertaken, or in which you assisted. It is important to maintain the Diary as it forms the basis for the summaries which will support your registration for graduation. If you perform the same activity in a variety of work situations such as in the case of gathering geospatial data (as a GIS student) you only need to list the tasks carried out once and indicate the frequency with which they occur, e.g., daily, weekly, monthly, etc.

(b) The University may require you to submit the Diary in addition to the summaries when you register for graduation or award for a degree, diploma or certificate. As well as recording the practical work you have done, you should include details of any supervisory duties or activities such as health and fitness exercise /job on campus, voluntary service, introduction of new applicants to the University, etc. If you complete all the diary pages included in this Green Book, you can obtain additional pages from the University.

2.6.3 *The summary*

(a) You should complete a summary sheet for each position held. You must include full details of your work experience and whether you have been responsible for work of the other members of staff or not. Your employer must confirm the experience by signing the section at the bottom of each page. You should obtain this confirmation at the end of each job or placement in a department.

(b) If you remain in one job for a period of more than one year and if as you become more experienced the work becomes more complex and you take on increased responsibility, you should complete a summary sheet for each year spent on the job. In addition to giving details of the activities undertaken, you should indicate to which aspect of your area of study the job

placement relates. The summary sheets should be numbered. When you register for graduation you will be required to submit the completed summaries, verified by your employers as evidence that you have gained requisite practical experience. The University may also ask you to submit your diary if the information given in the summaries is not sufficient.

3.0 **Summary of Tasks which Demonstrate Professional Skills**

3.1 It is important that you complete and submit the final summary sheet. On this sheet you should cite examples from any of the jobs which you have done where you have demonstrated professional skills, such as changing existing procedures to improve the work, customizing software, etc. You should indicate the number of the summary sheets in which the description of your professional skills occurs. This summary needs not be verified by your employer or supervisor.

3.2 **The Diary and the Summary must be completed in Clear, Legible Handwriting Using Black Ink**

3.2.1 Examples of completed summaries from student working in a variety of organizations are to be found in this **GREEN BOOK**. In these examples, those activities which demonstrate professional skills are marked in bold italics.

3.2.2 These documents are intended to provide an easily understood record for you, your employers, and for the University. Students must be able to produce clear, concise reports; completion of your **GREEN BOOK** provides the opportunity to develop your expertise in this area.

3.3 **Work Experience Gained Prior to Students Registration**

Experience gained prior to registration can contribute to practical experience requirements. If you have gained some relevant experience, you should complete a summary sheet for each completed job and if possible, obtain verification

from your further experience in the Diary and the Summary Sheet.

4.0 Practical Experience Requirement for Graduation

4.1 As a student of Regent University of Science and Technology, you must demonstrate that in addition to passing the examination, you have to obtain the relevant practical experience. The period of practicum/clerkship/clinical rotations or field experience required is determined by your program of study:

4.2 Undergraduate Degree

At least eight (8) months taken between vacation periods. An exemption certificate may be awarded by the Career Advisory and Employability Service in place of several years of workplace experience prior to the student's admission into Regent Ghana. This experience must be related to the student's area of study.

4.3 Diploma

At least six (6) months taken between vacation periods. An exemption certificate may be awarded by the Career Advisory and Employability Service in place of several years of workplace experience prior to the student's admission into Regent Ghana. This experience must be related to the student's area of study.

4.4 Certificate

At least three (3) months taken between vacation periods.

B. Internship Policies & Procedures

1.0 Coats and Regent ID Badges

- 1.1 The Regent Ghana branded Blazer and ID badge identifies the individual as a student of the University
- 1.2 Engineering students may wear their Blazer or Blue Overall and ID badge in their attachment/internship settings.
- 1.3 If the Blazer or ID badge is missing or stolen, the student must report this to the Director of Student Affairs as soon as possible.
- 1.5 Giving or loaning a Regent Ghana branded Blazer or ID to another person not a member of the Regent Ghana community is considered an unprofessional behavior and therefore subject to disciplinary action.

2.0 Students' Involvement in internship/ Field Work

- 2.1 Upon admission, students are required to obtain and to provide the required documentation indicating that they do not have conditions that would endanger the health and well-being of others.
- 2.2 The documentation includes:
 - immunizations,
 - verification from a physician who has performed a medical history and physical examination as to the health of the student and background checks for a legal history.
- 2.3 Students must also be able to demonstrate that their health and abilities will enable them to meet the technical standards of the program.

3.0 Workplace Confidentiality

- 3.1 During the course of study, students will come into contact with a workplace's, client or customer confidential information. In general, students are permitted to discuss workplace information with officers who are directly involved in providing service.
- 3.2 Students must obtain permission for presentations and should not divulge a client's

name or other confidential information identifying relating to the place of work or internship. Students should not divulge a person's or any workplace confidential information in casual comment.

3.3 Any discussion of a client, customer, peer, or employer should be a professional discussion and not cause misunderstanding or distrust of the service offered at the site.

3.4 Failure to adhere to these professional behavior instructions may constitute a violation of the Regent Ghana Honor Code.

4.0 Performing Activities

- 4.1 Students may not perform any work or procedures without appropriate supervision. The supervisor generally should be present for any procedure.
- 4.2 Students are not to take the place of qualified staff.
- 4.3 Students may not accept payment or remuneration for services except where such payments are permitted by the University.

5.0 Internship Assignments

- 5.1 Internships are assigned by the Office of Internship Affairs.
- 5.2 Students complete an Internship Schedule Form with their proposed rotations and schedule and submit it to the Office of Internship Affairs for approval.
- 5.3 When requested rotations, times, or locations cannot be accommodated, the Office of Internship Affairs will make assignments based on the students educational goals and geographic/personal preferences.
- 5.4 Although rarely granted, students who wish to change their rotation site after assignments have been made may apply for a change of rotation site if they have an extreme hardship.

5.5 The student, if not satisfied with the outcome of the decision by the Office of Internship Affairs, may appeal the decision to the Director of Students' Affairs; the Director's decision will be final.

6.0 The Coordinator for Internship Affairs (CIA)

6.1 The responsibility for decisions directly affecting the educational experience of students in their Internship setting resides with the Coordinator for Internship Affairs (equivalent to the status of Associate Dean or Associate Director).

6.2 The Coordinator for Internship Affairs (also Chair of the Internship Committee) is responsible for supervising and directing the clinical education of students. To fulfill this role, the Coordinator for Internship Affairs may delegate appropriate authority to the Vice Chair of the Internship Committee within the School.

6.3 The Coordinator for Internship Affairs is responsible for decisions directly affecting the educational experience of the students within the clinical site.

6.4 The Coordinator for Internship Affairs has the authority to evaluate, establish, and arrange for rotations at sites that he/she believes are of high quality, and to make decisions relative to preceptors, services, academic issues, and behavioral issues that occur. Decisions will be made to maximize the educational experience of the student. Other factors that may be considered in such decisions include personality conflicts, availability of staff or any other factor that impacts technology education.

6.5 The Coordinator for Internship Affairs may require student attendance at scheduled conferences and presentations, writing of papers, case presentation and other appropriate activities. In short, the Coordinator for Internship Affairs has the authority and responsibility to enforce the academic policy of the Regent Ghana at the clerkship sites.

6.6 The Coordinator for Internship Affairs is responsible for providing a progress report for students to the Promotion Board with recommendations for pass or failure, following

the completion of all requirements. The Coordinator for Internship Affairs is also responsible for providing a progress report for students to the faculty at the completion of final year to recommend for graduation.

6.7 As part of the Student Performance Evaluation (Dean's letter), the Coordinator for Internship Affairs will provide an assessment of the student's strengths and weaknesses in their clerkship training. Both cognitive skills and non-cognitive issues will be addressed. This assessment is based on discussions during site visits, preceptors or site leadership. Student interviews, as needed, evaluation forms and logbooks. Those students who are experiencing clerkship difficulties will be required to meet with the Coordinator for Internship Affairs. All students are encouraged to meet with the Coordinator for Internship Affairs, especially those who are unsure of the direction of their final year.

6.8 If a student fails a Internship rotation, the Coordinator for Internship Affairs will interview the student, interview the preceptor; a written record of these interviews will be kept.

6.9 The Coordinator for Internship Affairs also will make a recommendation to the Academic Senate concerning the student's failure based on overall performance and overall knowledge content that was gained or missed. This recommendation is non-binding. The Academic Senate makes the final decision. The Coordinator for Internship Affairs may enlist the appropriate committee chair to assess the student difficulties and the terms of the remediation.

6.10 The Coordinator for Internship Affairs has the authority to initiate interim temporary suspension or an immediate health leave for students. If the Coordinator for Internship Affairs determines that a student's action may constitute a threat to their own welfare or that of fellow students, staff, or clients, the student may be suspended or placed on health leave effective immediately. Once placed on leave or suspended, the student is no longer covered by Regent Ghana policy (liability coverage, etc.). This notification must be in writing, and the Director of Students' Affairs must be notified within three working days of such action. Possible situations where such action may be

necessary include, but are not limited to the following:

- a. Substance abuse (alcohol & other drugs);
- b. Medical or psychological illnesses;
- c. Suspected or alleged illegal behavior (until evidence resolves or substantiates evidence);
- d. Suspected or alleged physical, sexual, or emotional abuse (until evidence resolves or substantiates allegation), or
- e. Other unethical or unprofessional behavior.

6.11 The power of the Coordinator for Internship Affairs to initiate interim suspension is not limited to the above list. Immediately following a temporary suspension, a Behavioral Committee will be called. The initial step in the process is to notify the Director of Students' Affairs as to the need for such a hearing.

7.0 Internship Competencies

7.1 In the Internship setting students assume the responsibility for obtaining knowledge from the readings and experiences rather than from lectures and laboratories. Faculty members will direct learning.

7.2 Students must become self-motivated learners, which includes the skills for life-long learning that or graduate must acquire to become and remain competent.

7.3 During the rotation students must learn the objectives outlined for that rotation located on the Internship Coordinator's website. Students must also read all assigned texts and complete the cases or assignments on the Internship Coordinator's website. These assignments will prepare the student for the post-rotation presentation and exam.

7.4 Students must also conduct literature research in those areas assigned by the supervisor.

8.0 Core Internship Sites

8.1 Regent Ghana updates its core technical training site information; therefore, students are encouraged to access this information via Regent Ghana website at: www.yeshuaghana.net: see Current Students, Internship Program, and Affiliates Regions.

9.0 Notice of Site Changes

9.1 Internship sites are subject to change based on the administration, student training needs, and/or administrative changes in the workplace.

9.2 While the training sites are subject to change without notice to students, those students who are in internship rotations at the time of the change will be accommodated for the duration of the internship when possible.

9.3 Internship site changes will be updated annually.

10.0 Student Problems/Issues

If a supervising faculty suspects or identifies problems with a student's progress or performance that supervisor is to contact the Coordinator for Internship Affairs (CIA). All reports will be thoroughly investigated and, should action be taken, the appropriate procedures as outlined in this Workbook will be followed. Examples of such problems may include, but are not limited to:

- Poor interpersonal skills (i.e., personality problems, etc.);
- Deficient practical skills;
- Below average academic performance;
- Unexcused absenteeism;
- Medical or psychological illness
- Suspected substance abuse (alcohol and other drugs); or
- Suspected illegal behavior

c. Internship/Attachment Logbook

Regulations of the Curriculum

a. Prescribed Minimum Duration of Obligatory internship:

18 weeks	Bachelor Degree
12 weeks	Diploma
8 weeks	Certificate

b. When can internships be recognized?

Students may serve obligatory internships after completion of the taught courses in a program that is after the final year. The student is required to have served at least two vacation field attachments during the duration of the programs. At least eight (8) weeks of attachment have to be served prior to the commencement of the internship also understood as 'internship'.

c. Duration of an individual internship:

The individual internships must not fall below a minimum duration of two weeks.

d. Evaluation:

An evaluation is done at the end of every attachment period. The completed questionnaires must be signed by the appropriate officers. The logbook must document the period, locality, supervisor, organization, activities and skills acquired.

TRAINING IN
FITNESS
VISUALIZATION
ATTITUDE
SELF MOTIVATION
PLANNING
&
LANGUAGE

LIFE GAME PLAN

MY PERSONAL-LIFE GAME PLAN

(See Sample in Appendix 1)

A. Personal Vision Statement

B. Personal Mission Statement

C. Core Values:

1 _____

2 _____

3 _____

D. Personality (two words that define you): _____

1. (Who do you think you are?) _____

2. (What do others say you are?) _____

E. Personal Life goals:

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

YEAR ONE GAME PLAN (20__)

One –month objective:

Affirmation:

Three –month objective:

Affirmation:

Six –month objective:

Affirmation:

One –year objective:

Affirmation:

YEAR THREE GAME PLAN (20__)

One –month objective:

Affirmation:

Three –month objective:

Affirmation:

Six –month objective:

Affirmation:

One –year objective:

Affirmation:

YEAR FIVE GAME PLAN (20__)

One –month objective:

Affirmation:

Three –month objective:

Affirmation:

Six –month objective:

Affirmation:

One –year objective:

Affirmation:

YEAR EIGHT GAME PLAN (20__)

One –month objective:

Affirmation:

Three –month objective:

Affirmation:

Six –month objective:

Affirmation:

One –year objective:

Affirmation:

YEAR TEN GAME PLAN (20__)

One –month objective:

Affirmation:

Three –month objective:

Affirmation:

Six –month objective:

Affirmation:

One –year objective:

Affirmation:

Submission of Personal Game Plan

Date and Time submitted:

Student's Department:.....

.....
Sign: *Student's Advisor*

.....
Sign: *Director of Career Advisory and Employability
Service*

MOTIVATION AND INSPIRATION
FROM OTHERS

MOTIVATION AND INSPIRATION

A. Your Ten Most Favorite Quotes

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

B. Ten Leadership Virtues of Jesus Christ (Isa, Yesu) you want to live by.

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

B. Ten Motivational Books read (*use APA referencing style*)

1.

2.

3.

4.

5.

6.

7. _____
8. _____
9. _____
10. _____

Oral Test (A, B & C):

Grade: ____/10

.....
Name & Sign: Examiner

.....
Date

RESEARCH SEMINAR
EVALUATION REPORT

RESEARCH SEMINAR EVALUATION REPORT

Undergraduate Technology Education

Student's name: _____

Report Period Start Date _____ End Date _____

Number of weeks spent with the student _____

Name of Supervisor _____ Discipline _____

Project Title: _____

Has the research proposal been approved by the Ethics Committee? Yes ☐ No ☐

1. Student understands the process of hypothesis generation

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

2. Student understands the process of developing a research question

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

3. Using evidence-based research techniques: performed a literature search relevant to the research.

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

4. Student understands the process of developing a problem statement

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

5. Student understands the process of developing experimental/intervention design

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

6. Student understands statistics in order to plan experiment/research

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

7. Student understands the process of data generation collection, analysis and interpretation

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

8. Student understands the process of applying statistics to the collected data

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

9. Student can use a basic statistical software

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

10. Recognizes the importance and process of sharing the research information

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				
SATISFACTORY <input type="checkbox"/>		UNSATISFACTORY <input type="checkbox"/>		

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Signature of Evaluator _____

Date _____

CRITICAL & CREATIVE THINKING SEMINAR EVALUATION REPORT

Undergraduate Education

Student's name: _____

Report Period Start Date _____ End Date _____

Number of hours spent on this course _____

Name(s) of
Instructor(s) _____

1. A Profile of Student's Team at Work, Problem Identification, Formation of Virtual Teams

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

2. Student has developed a vision for constructive change, based on his/her work values

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

3. Student has created his/her purpose and goals aligned with his or her team.

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

4. Student has identified his/her skills, explored the concept of "flow, where his or her skills match the challenge".

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

5. Student has personal mastery to fill the skill and knowledge gap, problem solving using the cooperative response.

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

6. Student understands a team communication model for the use of strategies and behaviors in the light of situational factors, systems thinking

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

7. Student understands team learning through synergy, self risk and generating options, motivation problem solving

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

8. Student understands critical and creative thinking: How his/her thinking habits can help him/her get more of the results he/she wants.

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

9. Student appreciates role play: How a difficult conversation can be improved through the cooperative response.

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

10. Student uses Mental models and the "the theory of U" and its practical application to organization issues

Unsatisfactory	<input type="checkbox"/>	Deficiencies Noted	<input type="checkbox"/>	Good	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Outstanding	<input type="checkbox"/>
----------------	--------------------------	--------------------	--------------------------	------	--------------------------	-----------	--------------------------	-------------	--------------------------

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				
SATISFACTORY <input type="checkbox"/>		UNSATISFACTORY <input type="checkbox"/>		

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Signature of Instructor _____

Date _____

BUSINESS PLAN
ASSESSMENT REPORT

BUSINESS PLAN & IMPLEMENTATION ASSESSMENT REPORT

Undergraduate Technology Education

At the end of the degree program, in partial fulfillment of the requirements for the course **Attachment and Business Plan**, every student is required to submit a Business Plan and defend a small venture he/she has established. This plan will be assessed as follows:

A BUSINESS PLAN

Description of Business venture: _____

Date established _____ Date Assessed _____

Student's autobiography with pictures	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Executive Summary	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
The Company	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Market Analysis	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Products and Services	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Business Strategy and implementation	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Competition	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Operations	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Competition	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Organization	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Financial Analysis	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Supporting Documents	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>
Did the student include business strategy review plan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>

***Identify Strengths of the student:**

Every student is required to complete a Personality Test and submit a copy of result to the Dean's Office.

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Was the evaluation the Business Plan reviewed with the student? Yes No

Signature of Assessor _____ Date _____

Signature of Student _____ Date _____

IMPLEMENTATION/BUSINESS START-UP DEFENSE:

1. General Comments

2. Assess the overall ranking of the student's presentation

Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
--	--	----------------------------------	---------------------------------------	---

Overall Grade: ____/10

Examiners: *Name & Sign:*

Date

.....
.....
.....
.....

SEMINARS/ PUBLIC LECTURE(S

WORKSHOPS

PUBLIC SERVICE

GYM/ HEALTH WALK

CERTIFICATE OF ATTENDANCE (SEMINARS/ PUBLIC LECTURE(S))

FIRST CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

SECOND CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

THIRD CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

FOURTH CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

FINAL COMMENTS:

CERTIFICATE OF ATTENDANCE (WORKSHOPS)

FIRST CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

SECOND CERTIFICATE OF ATTENDANCE

Topic:		
Venue	Date & Signature of Tutor	Tutor's stamp

CERTIFICATE OF ATTENDANCE (BUSINESS MEETING)

(use Robert's Rule of Order)

FIRST CERTIFICATE OF ATTENDANCE *(Pose as Secretary)*

Description of Meeting:		
Venue	Date & Signature of Tutor	Tutor's stamp

SECOND CERTIFICATE OF ATTENDANCE *(Pose as Chair)*

Description of Meeting:		
Venue	Date & Signature of Tutor	Tutor's stamp

FINAL COMMENTS:

CERTIFICATE OF ATTENDANCE (PUBLIC SERVICE)

The objective is to instill a sense of patriotism in the student.

FIRST CERTIFICATE OF ATTENDANCE

Activity:		
Venue	Date & Signature of Tutor	Tutor's stamp

SECOND CERTIFICATE OF ATTENDANCE

Activity:		
Venue	Date & Signature of Tutor	Tutor's stamp

CERTIFICATE OF ATTENDANCE (GYM/ HEALTH WALK)

The objective is to encourage health consciousness in the student.

FIRST CERTIFICATE OF ATTENDANCE

Activity:		
Venue	Date & Signature of Tutor	Tutor's stamp

SECOND CERTIFICATE OF ATTENDANCE

Activity:		
Venue	Date & Signature of Tutor	Tutor's stamp

FINAL COMMENTS:

General Work Experience

Occupational Skills & Employability Skills

CERTIFICATE OF ATTENDANCE (VOLUNTARY WORK)

*CERTIFICATE OF ATTENDANCE (Occupational Skills)

Location(S)	Period	Date & Field Instructor's Signature	Instructor's stamp

*Students may do **Voluntary Work** in order to gain automotive skills, hair dressing, refrigeration skills, gardening, etc). The objective is to instill the spirit of "Do It Yourself (DIY) in the students, instill a sense of sacrifice in them.

Was this exercise approved by Regent University of Science and Technology? Yes ☐ No ☐

Date/Signature of Coordinator_____

Summary of Activities undertaken:

Summary of Challenges Encountered/ Experience gained:

Summary of Achievements: (Use other side of form if needed)

Date/Signature of Student_____

Employability Skills Requirement

1. Resume/CV writing

Has the student submitted his/her curriculum vitae as required? Yes ☐ No ☐

Date Submitted	Remarks

Career Advisory and Employability Service Director's Signature

2. Personal Game Plan (for Self-Branding)

Has the student submitted his/her Personal Game Plan as required? Yes ☐ No ☐

Date Submitted	Remarks

The Game Plan must be submitted at least 10 days before day of matriculation.

Career Advisory and Employability Service Director's Signature

3. Publication

Has the student co-published an article with lecturer? Yes ☐ No ☐

Authors	Detailed bibliography

A Regent Ghana student or two may publish at least one article with a lecturer in their area of academic discipline.

Signature of Dean of Research _____ Date _____

Miscellaneous

1. MEMBERSHIP OF PROFESSIONAL BODIES

Has the student registered with any professional body? Yes ☐ No ☐

Date of Registration	Name of Professional Body

A Regent Ghana student is required to belong to at least two professional bodies.

Career Advisory and Employability Service Director's Signature

.....

2. MEMBERSHIP OF UNIVERSITY CLUB(S)

Is the student a member of any University club? Yes ☐ No ☐

Date of Registration	Name of Professional Body

A Regent Ghana student is required to participate in extra-curricular activities.

Career Advisory and Employability Service Director's Signature

.....

3. LIST OF COMPUTING COURSES TAKEN WHILE IN UNIVERSITY

.....

.....

.....

.....

Certificate of Attendance (Health & Safety Course)

*Certificate of Attendance (Health, Safety & Emergency Planning)

Location	Period	Date & Field Instructor's Signature	Instructor's stamp

*Students are required to have training in fire safety, basic first aid, workplace safety, etc). The objective is to instill the spirit of "Health & Safety" (H&S) consciousness in the students.

Summary of Activities undertaken:

Summary of Challenges Encountered/ Experience gained:

Summary of Achievements: (Use other side of form if needed)

Date/Signature of Student_____

Has the student been awarded a health and safety certificate? Yes ☐ No ☐

Date/Signature of Coordinator_____

Certificate of Proficiency in Language

Name of Language

Languages or non-verbal communication Include: French, German, Chinese, Hebrew, Greek, Arabic, Akan, Spanish, Sign Language, Body Language, Handwriting Analysis (Graphology)

Location	Period	Date & Instructor's Signature	Instructor's stamp

Was this Language approved by Regent University of Science and Technology? Yes ☐ No ☐

Name of Certificate: _____

Duration of course: _____

Summary of topics treated:

(a) Students grade for written work:

(b) Students grade for oral work:

Date/Signature of Student _____ Date _____

Date/Signature of Lecturer _____ Date _____

Language requirement for graduation fulfilled: _____

Dean

Achievements

Academic _____

Leadership _____

Workplace _____

Personal (Innovation, Creativity, Music, Sports) _____

Self-taught skills (computing, language, music, etc _____

Hobbies _____

ATTACHMENT/INTERNSHIP

Year One

WEEKLY ROTATION

REPORTS

WEEKLY ROTATION REPORT 1 (Student)

NAME: _____

SPECIFIC TECHNOLOGY AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 2 (Student)

NAME: _____

SPECIFIC TECHNOLOGY AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 3 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 4 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

Inter-semester Vacation Attachment/
Technology Rotation Report 1
(Year One First Attachment)

Name: _____ Week # _____ Content 0 1 2 3 4 5 6 7 8 9 10

Internship Site/Area: _____ Initiative 0 1 2 3 4 5 6

Date of Assignment: _____ Report Grade: /20 Organization 0 1 2 3 4

Name and Title of person you reported to: _____

1. What are the titles of all technical workers who might work in this area? What education is required for each of these workers?

2. What type of personality do you think would be required to be a successful employee in this area? Why?

3. Describe in detail procedures you observed or duties you were assigned and how you carried them out:

4. **Definitions of at least 2 new terms you learned today:**

5. **Definition of an activity you learned today that relate to your clinical observations:**

6. **Your thoughts and feelings about today:**

7. **Would you consider this area as a future engineering/science career? Why or why not?**

8. What did you learn from this rotation that you will use in the future?

INTERNSHIP EVALUATOR'S REPORT 1 (Year One First Attachment)

Student's name: _____

Report Period Start Date _____ End Date _____

Number of weeks spent with the student _____

HOW WELL DID THE INTERN

1. Communicate with clients, customer, fellow-workers? _____
2. Assess his/her limitations and seek assistance from others as needed? _____
3. Read technology literature related to the problems around communities? _____
4. Complete assigned work on time? _____
5. Demonstrate respect for authority and team members? _____
6. Greet and smile? _____
7. Motivate others? _____
8. Make positive comments about the workplace? _____

WAS THE INTERN

9. Readily available when on call? _____
10. Enthusiastic to learn? _____
11. Enthusiastic to teach others? _____
12. Punctual and involved in visits, seminars, and other learning opportunities? _____
13. Proficient in technical skills? _____
14. Actively involved in all activities? _____
15. Appropriately dressed? _____
16. Proactive (not waiting to be told what to do)? _____
17. Ready to be corrected when he/she made mistakes? _____
18. Ready to go an extra mile or sacrifice? _____

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				
SATISFACTORY <input type="checkbox"/>		UNSATISFACTORY <input type="checkbox"/>		

As far as you are aware, the intern was absent _____ days on this rotation for _____ reason(s).

During the time mentioned above, the intern's progress was reviewed with the intern. Yes No

During this internship rotation/attachment has there been performance or behavioral concerns that you would like to discuss with the internship Coordinator? Yes ☐ No ☐

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Check one of the following:

☐
☐

This internship/attachment was undertaken as one-on-one practical supervision.

This internship was undertaken as a department or division-based practical with multiple supervisors.

Signature of Evaluator _____

Date _____

Signature of intern _____

Date _____

Year Two

WEEKLY ROTATION

REPORTS

WEEKLY ROTATION REPORT 1 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person's response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 2 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 3 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 4 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 5 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 6 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 7 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.
2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?
3. Describe one procedure or treatment you witnessed and discuss a person’s response.
4. What were your responsibilities or duties this week?
5. What new knowledge or skill did you learn this week?
6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 8 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

Inter-semester Vacation Attachment/
Technology Rotation Report 1
(Year One Second Attachment)

Name: _____ Week # _____ Content 0 1 2 3 4 5 6 7 8 9 10

Internship Site/Area: _____ Initiative 0 1 2 3 4 5 6

Date of Assignment: _____ Report Grade: /20 Organization 0 1 2 3 4

Name and Title of person you reported to: _____

1. What are the titles of all technical workers who might work in this area? What education is required for each of these workers?

2. What type of personality do you think would be required to be a successful employee in this area? Why?

3. Describe in detail procedures you observed or duties you were assigned and how you carried them out:

4. **Definitions of at least 2 new terms you learned today:**

5. **Definition of an activity you learned today that relate to your clinical observations:**

6. **Your thoughts and feelings about today:**

7. **Would you consider this area as a future engineering/science career? Why or why not?**

8. What did you learn from this rotation that you will use in the future?

INTERNSHIP EVALUATOR'S REPORT 1 (Year One Second Attachment)

Student's name: _____

Report Period Start Date _____ End Date _____

Number of weeks spent with the student _____

HOW WELL DID THE INTERN

1. Communicate with clients, customer, fellow-workers? _____
2. Assess his/her limitations and seek assistance from others as needed? _____
3. Read technology literature related to the problems around communities? _____
4. Complete assigned work on time? _____
5. Demonstrate respect for authority and team members? _____
6. Greet and smile? _____
7. Motivate others? _____
8. Make positive comments about the workplace? _____

WAS THE INTERN

9. Readily available when on call? _____
10. Enthusiastic to learn? _____
11. Enthusiastic to teach others? _____
12. Punctual and involved in visits, seminars, and other learning opportunities? _____
13. Proficient in technical skills? _____
14. Actively involved in all activities? _____
15. Appropriately dressed? _____
16. Proactive (not waiting to be told what to do)? _____
17. Ready to be corrected when he/she made mistakes? _____
18. Ready to go an extra mile or sacrifice? _____

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				

SATISFACTORY <input type="checkbox"/>	UNSATISFACTORY <input type="checkbox"/>
--	--

As far as you are aware, the intern was absent ____ days on this rotation for _____reason(s).

During the time mentioned above, the intern's progress was reviewed with the intern. Yes ☐ No ☐

During this internship rotation/attachment has there been performance or behavioral concerns that you would like to discuss with the internship Coordinator? Yes ☐ No ☐

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Check one of the following:

- ☐ This internship/attachment was undertaken as one-on-one practical supervision.
☐ This internship was undertaken as a department or division-based practical with multiple supervisors.

Signature of Evaluator _____ Date _____

Signature of intern _____ Date _____

Year Three
WEEKLY ROTATION
REPORTS

WEEKLY ROTATION REPORT 1 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person's response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 2 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person's response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 3 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person's response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 4 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person's response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

Inter-semester Vacation Attachment/
Technology Rotation Report 1
(Year Two First Attachment)

Name: _____ Week # _____ Content 0 1 2 3 4 5 6 7 8 9 10

Internship Site/Area: _____ Initiative 0 1 2 3 4 5 6

Date of Assignment: _____ Report Grade: /20 Organization 0 1 2 3 4

Name and Title of person you reported to: _____

1. What are the titles of all technical workers who might work in this area? What education is required for each of these workers?

- 2. What type of personality do you think would be required to be a successful employee in this area? Why?**

- 3. Describe in detail procedures you observed or duties you were assigned and how you carried them out:**

- 4. Definitions of at least 2 new terms you learned today:**

- 5. Definition of an activity you learned today that relate to your clinical observations:**

- 6. Your thoughts and feelings about today:**

7. Would you consider this area as a future engineering/science career? Why or why not?

8. What did you learn from this rotation that you will use in the future?

INTERNSHIP EVALUATOR'S REPORT 1 (Year Two First Attachment)

Student's name: _____

Report Period Start Date _____ End Date _____

Number of weeks spent with the student _____

HOW WELL DID THE INTERN

1. Communicate with clients, customer, fellow-workers? _____
2. Assess his/her limitations and seek assistance from others as needed? _____
3. Read technology literature related to the problems around communities? _____
4. Complete assigned work on time? _____
5. Demonstrate respect for authority and team members? _____
6. Greet and smile? _____
7. Motivate others? _____
8. Make positive comments about the workplace? _____

WAS THE INTERN

9. Readily available when on call? _____
10. Enthusiastic to learn? _____
11. Enthusiastic to teach others? _____
12. Punctual and involved in visits, seminars, and other learning opportunities? _____
13. Proficient in technical skills? _____
14. Actively involved in all activities? _____
15. Appropriately dressed? _____
16. Proactive (not waiting to be told what to do)? _____
17. Ready to be corrected when he/she made mistakes? _____
18. Ready to go an extra mile or sacrifice? _____

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				
SATISFACTORY <input type="checkbox"/>		UNSATISFACTORY <input type="checkbox"/>		

As far as you are aware, the intern was absent ____ days on this rotation for _____ reason(s).

During the time mentioned above, the intern's progress was reviewed with the intern. Yes ☐ No ☐

During this internship rotation/attachment has there been performance or behavioral concerns that you would like to discuss with the internship Coordinator? Yes ☐ No ☐

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Check one of the following:

☐
☐

This internship/attachment was undertaken as one-on-one practical supervision.

This internship was undertaken as a department or division-based practical with multiple supervisors.

Signature of Evaluator _____

Date _____

Signature of intern _____

Date _____

Year Four
WEEKLY ROTATION
REPORTS

WEEKLY ROTATION REPORT 1 (Student)

NAME: _____

SPECIFIC TECHNOLOGY AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 2 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 3 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 4 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 5 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 6 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 7 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

WEEKLY ROTATION REPORT 8 (Student)

NAME: _____

SPECIFIC AREA

WEEK OF ROTATION (dates)

THIS REPORT IS COMPLETED EACH WEEK WHILE YOU ARE ON ROTATION. REPORTS ARE E-MAILED, FAXED, OR DELIVERED PERSONALLY TO YOUR INSTRUCTOR.

1. Describe the best thing that happened this week.

2. Describe the worst thing that happened this week. If the “worst” was a mistake, how was it corrected?

3. Describe one procedure or treatment you witnessed and discuss a person’s response.

4. What were your responsibilities or duties this week?

5. What new knowledge or skill did you learn this week?

6. Interview one staff member and give his or her **name, title, training, job description and level of job satisfaction.**

Inter-semester Vacation Attachment/

Technology Rotation Report 1

(Year Two Second Attachment)

Name: _____ Week # _____ Content 0 1 2 3 4 5 6 7 8 9 10

Internship Site/Area: _____ Initiative 0 1 2 3 4 5 6

Date of Assignment: _____ Report Grade: /20 Organization 0 1 2 3 4

Name and Title of person you reported to: _____

1. What are the titles of all technical workers who might work in this area? What education is required for each of these workers?

2. What type of personality do you think would be required to be a successful employee in this area? Why?

3. Describe in detail procedures you observed or duties you were assigned and how you carried them out:

4. Definitions of at least 2 new terms you learned today:

5. Definition of an activity you learned today that relate to your clinical observations:

6. Your thoughts and feelings about today:

7. Would you consider this area as a future engineering/science career? Why or why not?

8. What did you learn from this rotation that you will use in the future?

Upload all your attachment files here

INTERNSHIP EVALUATOR'S REPORT 1 (Year Two Second Attachment)

Student's name: _____

Report Period Start Date _____ End Date _____

Number of weeks spent with the student _____

HOW WELL DID THE INTERN

1. Communicate with clients, customer, fellow-workers? _____
2. Assess his/her limitations and seek assistance from others as needed? _____
3. Read technology literature related to the problems around communities? _____
4. Complete assigned work on time? _____
5. Demonstrate respect for authority and team members? _____
6. Greet and smile? _____
7. Motivate others? _____
8. Make positive comments about the workplace? _____

WAS THE INTERN

9. Readily available when on call? _____
10. Enthusiastic to learn? _____
11. Enthusiastic to teach others? _____
12. Punctual and involved in visits, seminars, and other learning opportunities? _____
13. Proficient in technical skills? _____
14. Actively involved in all activities? _____
15. Appropriately dressed? _____
16. Proactive (not waiting to be told what to do)? _____
17. Ready to be corrected when he/she made mistakes? _____
18. Ready to go an extra mile or sacrifice? _____

ASSESSMENT OF STUDENT'S PERFORMANCE:				
Unsatisfactory <input type="checkbox"/>	Deficiencies Noted <input type="checkbox"/>	Good <input type="checkbox"/>	Excellent <input type="checkbox"/>	Outstanding <input type="checkbox"/>
FINAL ASSESSMENT OF STUDENT'S PERFORMANCE OVERALL:				
SATISFACTORY <input type="checkbox"/>		UNSATISFACTORY <input type="checkbox"/>		

As far as you are aware, the intern was absent _____ days on this rotation for _____ reason(s).

During the time mentioned above, the intern's progress was reviewed with the intern. Yes ☐ No ☐

During this internship rotation/attachment has there been performance or behavioral concerns that you would like

to discuss with the internship Coordinator? Yes ☐ No ☐

Identify Strengths:

Identify Areas for Improvement:

Additional Comments: (Use other side of form if needed)

Check one of the following:

☐
☐

This internship/attachment was undertaken as one-on-one practical supervision.

This internship was undertaken as a department or division-based practical with multiple supervisors.

Signature of Evaluator _____

Date _____

Signature of intern _____

Date _____

APPENDIX 1

CREATE YOUR PERSONAL-LIFE GAME PLAN

(To be submitted to the Director of Career Advisory and Employability Service on the day of matriculation)
Your Plan must be well thought out before entering it into this Green Book. A Plan hastily recorded will be rejected)

Follow the following sample

(adopted from Keith Harrel, *Attitude is Everything* (New York: HarperCollins, 2005))

Steps for designing your game plan

1. Write down primary goals for your private life
2. Think about the sort of person you desire to be
3. Ask yourself the following questions
 - (i) Where would you like to live?
 - (ii) What lifestyle would you like to have?
4. List step-by-step goals that will help you stretch and grow along the way.
5. Next, list mini-goals that will add value and enrichment to your life, such as increasing levels of fitness, mastery of personal challenges, or courses or experiences that might increase your level of understanding, awareness or spirituality.
6. Put a deadline on each of them, starting with one month and then go to three months, six months, one year, three years, five years, eight years, and ten years.
7. For each mini-goals, write a positive affirmation stating why the goal is important to you and how it will help you move closer to your goal.
8. Create a private life game plan.

Below is a blueprint to assist you in designing your own private-life-Game Plan.

Shortly after graduating from high school Pat began working full-time in the corporate offices of a major retailer in California. One of her life-long goals is to earn an advanced degree in order to work as a curator at the Smithsonian Institution. She has designed a ten-year life plan that incorporates her four primary goals:

Primary Long-Term:

Earn a bachelor's degree in Art History
Spend Quality time with Family and friends
Relocate to Washington DC area
Work as curator at Smithsonian

1. YEAR ONE

One –month objective: Talk with Human Resource personnel regarding tuition reimbursement program. Visit museum and gallery exhibits and lecturers at least twice a month. Reserves one evening per week and one weekend per month for “special” time with family.

Start college selection process.

Affirmation: I am blessed to have the support of my family and supervisor when I resume my education.

Three month objective: Subscribe to art publications.

Affirmation: I am happy to share my love for art with my family.

Six month objective: Enroll in speed reading and study skills courses.

Affirmation: I am prepared to return to college after a fifteen year hiatus and continue to work because I know how to maximize my time.

One year objective: Complete fifteen semester units of general education coursework each year at the community college until all 60 units are completed (approximately four years to complete).

2. YEAR THREE

One month objective: Volunteer at local museum to learn more about museum administration and operations.

Affirmation: I am an enthusiastic volunteer because I am familiar with the exhibitions and all related materials.

Three month objective: One week family vacation in Washington D.C.

Affirmation: I am able to spend quality time with my family while pursuing my goal to relocate to Washington D.C.

Six month objective: Narrow my decisions to three colleges to attend to in order to complete undergraduate degree.

Affirmation: I select the right college that will provide me with the best learning opportunities.

One year objective: Internship at the art museum.

Affirmation: I am an enthusiastic intern learning something new everyday that will help my professional advancement and personal growth.

3. YEAR FIVE

One-month objective: Transfer to four-year college to complete accelerate degree program (18-month program).

Affirmation: I am the best student in my classes because I complete all my assignments and come prepared to discuss the material.

Three-month objective: Create additional study time 5-to 7am and 9 to 11 pm daily.

Affirmation: I am a hard worker and will make time for my family, education and professional needs.

Six-month objectives: Apply for position at the museum.

Affirmation: I am an organized and resourceful administrator who can be depended on to keep abreast of the most recent developments in the field.

One-year objective: One week family vacation in Washington D.C., to celebrate graduation.

Apply for museum jobs in Washington D.C. (During years six and seven, Pat and her family relocated to Washington D.C., where she resumed her studies).

YEAR EIGHT

One month objective: Completion of Master's degree in museum studies.

Affirmation: I will complete my master's degree with honors by studying hard and remaining focused.

Three-month objectives: Publication of master's thesis on contemporary West Africa art.

Affirmation: I will curate a travelling exhibition based on my graduate research.

Six-month objective: Two weeks family vacation in Ghana.

Affirmation: I am a thoughtful and caring spouse and parent who always makes time for family gatherings.

One-year objective: Purchase home in Silver Spring, Maryland.

Affirmation: I will have a beautiful three bedroom home in Silver Spring, Maryland, with an affordable mortgage.

YEAR TEN

One-month objective: Research project in Senegal and Ivory Coast

Affirmation: I am chronicling important information for a ground-breaking documentary on engaging art trend in the region.

Three-month objective: Family to join for an extended vacation in West Africa.

Affirmation: I am truly blessed to have a loving and supportive family.

Six-month objective: Fifth year anniversary at National Museum of African Art.

Enroll in doctoral program in African Studies.

Affirmation: I am an impassioned student of life embracing my intellectual curiosity at every opportunity.

One-Year Objective: promotion to curator for Contemporary African Art.

Affirmation: I will be promoted to curator because of my outstanding research in Senegalese, Ivorian and Ghanaian art.

APPENDIX 2

DAILY ROTATION REPORT (Student)

(Student may make copies of this daily Report sheet. They do not need to fill this report in this book)

Week from ____/____/20____ to ____/____/20____
 Day Month Year Day Month Year

Date	Department/ Division	Tasks	Observations	Seminars
____/____ Day Month				
Additional Remarks – Reflexions:				
____/____ Day Month				
Additional Remarks – Reflexions:				
____/____ Day Month				
Additional Remarks – Reflexions:				
____/____ Day Month				
Additional Remarks – Reflexions:				
____/____ Day Month				

Final Evaluation of Green Book

Foreign Language	___/20
Attachment/Internship	___/30
Business Plan and Implementation	___/20
Motivation & Inspiration	___/10
Seminars, Public Lectures & Workshops	___/5
Health & Safety	___/3
Personal Game Plan	___/3
Public Service (Voluntary work without pay)	___/3
Gym & Health Walk	___/2
Occupational Skills	___/2
Résumé/CV Writing	___/2
Total	___/100

.....

Sign: *Director of Career Advisory and Employability Service*

.....
Sign: *Student's Society Warden*

.....
Sign: *Dean of Student's School*