

COOPERATIVE WORK EXPERIENCE

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END OF TERM SUMMARY SHEET

TO BE COMPLETED BY ALL WORK EXPERIENCE STUDENTS EACH TERM

STUDENT NAME: _____ **Course No:** _____

Term: _____ **Year:** _____

Business: _____ **Supervisor:** _____

Address: _____ **City:** _____

Phone: _____

1) Describe the jobs you performed:

2) Explain how your work experience on the job and your class work have contributed to one another, or how they have been related: _____

3) Did you accomplish your term objectives: ___Yes ___No Describe how each was accomplished, or why completion was not possible: _____

4) Did this job require writing skills? Yes ___ No ___.

If yes, do you feel you had adequate writing skills for the job? Yes ___ No ___.

Which writing classes have you taken? _____

5) Did this job require math skills? Yes ___ No ___.

If yes, do you feel you had adequate math skills for the job? Yes ___ No ___.

Which math classes have you taken? _____

6) Did this job require speech skills? Yes ___ No ___.

If yes, did you feel you had adequate speech skills for the job? Yes ___ No ___.

Which speech classes have you taken? _____