**Field Experience Training Guide**

**(FORMS ONLY)**

**2019 - 2020**

Contents

[**Appendix 2**](#_Toc40193118)

[**Evlauation Form 1: Training Orgnaization Evaluation Form 2**](#_Toc40193119)

[**Evlauation Form 2: Student Evaluation Form 4**](#_Toc40193120)

[**Evaluation Form 3: Faculty Member Evaluation Form 7**](#_Toc40193121)

[**Evaluation Form 4: Field Instructor Evaluation Form 8**](#_Toc40193122)

[**Appendix1 10**](#_Toc40193123)

[**Practical Training Registration 10**](#_Toc40193124)

[**APPENDIX2 13**](#_Toc40193125)

[**Form No five - Evaluation of the Field Visit 13**](#_Toc40193126)

[**APPENDIX 3 14**](#_Toc40193127)

[**Form Number (6): PREDICT REPORT 14**](#_Toc40193128)

[**APPENDIX 4 16**](#_Toc40193129)

[**Academic Report Guideline (Co-op) Cover page form 16**](#_Toc40193130)

# Appendix

## **Evlauation Form 1:** Training Orgnaization Evaluation Form

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No | Evaluation Elements | لا أوافق بشدة Strongly Disagree | لا أوافقDisagree  | محايدNeutral  | أوافقAgree | أوافق بشدةStrongly Agree | عناصر التقييم | م |
|  |  |  **0** | **1** | **2** | **3** | **4** |  |  |
|  |  **Financial Aspects** |  | **الجوانب المادية** |  |
| 1 | The training organization is equipped with the latest equipment and appropriate technologies needed to train students. |  |  |  |  |  | يتوفر لدى جهة التدريب التجهيزات الحديثة والتقنيات المناسبة لتدريب الطلبة. | 1 |
| 2 | The training organization provides an adequate working environment such as suitable air ventilation, lighting, comfortable chairs, and designated group workspaces.  |  |  |  |  |  | يتوفر في الجهة التدريبية بيئة عمل ملائمة كالتهوية والإضاءة والمقاعد المريحة وأماكن العمل المناسبة لعمل المجموعات وغيرها. | 2 |
| 3 | The overall appearance of the field instructors at the training organization is appropriate. |  |  |  |  |  | المظهر العام لمشرفي العملية التدريبية في الجهة التدريبية مناسب. | 3 |
|  | **Trust and Reliability**  |  | **الثقة والاعتمادية** |  |
| 4 | The training organization is committed in providing the training that is compatible with the students’ training plan. |  |  |  |  |  | لدى الجهة التدريبية جدية في تقديم التدريب المتوافق مع الخطة التدريبية للطلبة المتدربين. | 4 |
| 5 | The training organization fulfils its promises and obligations that relate to training students at the specified times.  |  |  |  |  |  | تقوم جهة التدريب بالوفاء بالتزاماتها ووعودها المختلفة ذات العلاقة بتدريب الطلبة في الأوقات المحددة. | 5 |
| 6 | The training organization shows great interest in solving problems related to training the students.  |  |  |  |  |  | تبدي جهة التدريب اهتماماً واضحاً بحل المشكلات المتعلقة بتدريب الطلبة. | 6 |
| 7 | The training organization completes the students’ performance evaluation forms in a timely manner. |  |  |  |  |  | تعمل جهة التدريب على تعبئة النماذج الخاصة بتقييم أداء الطلبة المتدربين في الأوقات المحددة. | 7 |
|  | **Response** |  | **الاستجابة** |  |
| 8 | The training organization provides the academic department/ college with the training opportunities available to them at the appropriate times. |  |  |  |  |  | تقوم الجهة التدريبية بتزويد القسم الأكاديمي/ الكلية بفرص التدريب المتاحة لديهم في الأوقات المناسبة. | 8 |
| 9 | The training organization cooperates and responds to students’ inquiries in a timely manner. |  |  |  |  |  | تتعاون وتستجيب جهة التدريب لاستفسارات الطلبة المتدربين دائماً وفي الوقت المناسب. | 9 |
| 10 | The training organization cooperates with the students and provides them with the required information and advice needed to complete the work. |  |  |  |  |  | تتعاون جهة التدريب بإعطاء الطلبة المتدربين المعلومات والتوجيهات الخاصة بإنجاز العمل. | 10 |
| 11 | The training organization responds and cooperates with the academic department with high flexibility with regards to the department needs, requirements and special circumstances. |  |  |  |  |  | تستجيب جهة التدريب وتتعاون مع القسم الأكاديمي بمرونة عالية في ضوء احتياج القسم ومتطلباته وظروفه الخاصة. | 11 |
|  | **Safety and Security**  |  | **الأمن والسلامة** |  |
| 12 | The training organization provides the work safety foundations such as fire extinguishers, emergency exits, alarms, security corridors, protective and safety equipment, etc. |  |  |  |  |  | يتوفر لدى الجهة التدريبية أسس السلامة المهنية كوسائل إطفاء الحريق ومخارج الطوارئ وأجهزة الإنذار والممرات الأمنية والمعدات الوقائية والسلامة الشخصية وغيرها. | 12 |
| 13 | The training organization is equipped with first aid tools at the training site to deal with minor injuries of students in a timely manner.  |  |  |  |  |  | لدى جهة التدريب صندوق إسعافات أولية في مواقع العمل من أجل التعامل مع الإصابات البسيطة للطلبة المتدربين وبصورة سريعة. | 13 |
| 14 | The training organization handles students’ information with complete confidentiality.  |  |  |  |  |  | تتعامل جهة التدريب مع المعلومات الخاصة بالطلبة المتدربين بسرية تامة. | 14 |
| 15 | The behavior of the field instructors at the training organization promoted a sense of safety and confidence among students and the academic department.  |  |  |  |  |  | سلوك مقدمي الخدمات التدريبية في الجهة التدريبية عزز الشعور بالأمان والثقة لدى الطلبة ولدى القسم الأكاديمي. | 15 |

## **Evlauation Form 2:** Student Evaluation Form

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No |  Evaluation Elements | لا أوافق بشدة Strongly Disagree | لا أوافقDisagree | محايدNeutral  | أوافقAgree | أوافق بشدةStrongly Agree | عناصر التقييم | م |
|  |  | **0** | **1** | **2** | **3** | **4** |  |  |
|  | **Skills and Knowledge** | **المهارات والمعرفة** |  |
| 1 | The training I received is related to my academic specialty.  |  |  |  |  |  | يتعلق التدريب بشكل مباشر بتخصصي الدراسي. | 1 |
| 2 | I have practiced what I have learned.  |  |  |  |  |  | تعلمت ومارست المعرفة العملية. | 2 |
| 3 | The training closed the gap between the knowledge I learned and practical application of it. |  |  |  |  |  | أعتقد أن التدريب سد الفجوات بين المعرفة والتطبيق العملي. | 3 |
| 4 | I learned many skills that will be useful in my career. |  |  |  |  |  | تعلمت عدد من المهارات التي أعتقد أنها ستكون مفيدة في حياتي المهنية. | 4 |
| 5 | The level of difficulty of the training course was acceptable. |  |  |  |  |  | أعتبر مستوى الصعوبة لهذا التدريب كان مقبولاً. | 5 |
| 6 | I was informed about the evaluation mechanism for the training course. |  |  |  |  |  | تم اعلامي بطريقة التقويم لمقرر التدريب. | 6 |
| 7 | The time duration of the training course is acceptable.  |  |  |  |  |  | تُعد الفترة الزمنية المخصصة للتدريب كافية. | 7 |
| 8 | Ability to planning and forecasting for financial needs in the short and long term. |  |  |  |  |  | القدرة على التخطيط و التنبؤ بالاحتياجات المالية في المديين الطويل و القصير. | 8 |
| 9 | Ability to analyze the financial statements of the organizations and assessing financial performance. |  |  |  |  |  | القدرة على تحليل القوائم المالية للمنظمات وتقيم الأداء المالي.. | 9 |
| 10 | Ability to manage financial portfolios and assess the risks. |  |  |  |  |  | القدرة على إدارة المحافظ المالية وتقييم المخاطر. | 10 |
|  | **Faculty Member** | **المشرف الأكاديمي** |  |
| 11 | The faculty member ensured my understanding of the skills that I need to acquire. |  |  |  |  |  | تحقق المشرف الأكاديمي من معرفتي للمهارات اللازم اكتسابها قبل بدء التدريب. | 11 |
| 12 | The University provided me with qualified faculty members that have experience in field training.  |  |  |  |  |  | توفر لنا الجامعة مشرفين أكاديميين متخصصين وذوي خبرات ميدانية جيدة. | 12 |
| 13 | The faculty member supervised me while coordinating with the field instructor. |  |  |  |  |  | يقوم المشرف الأكاديمي بالإشراف على عملية تدريب المتدربين بالتنسيق مع الشرف الميداني. | 13 |
| 14 | The faculty member followed the announced rules and regulations when evaluating the students. |  |  |  |  |  | يلتزم المشرف الأكاديمي بالتعليمات الجامعية المعلنة والمتعلقة بعملية تقويم المتدربين. | 14 |
| 15 | Choose from 0-4, to indicate the number of times the faculty member visited you onsite. |  |  |  |  |  | اختر من0-4 لتحديد عدد المرات التي قام المشرف الأكاديمي بزيارتك في جهة تدريبك. | 15 |
| 16 | Choose from 0-4, to indicate the number of times that you were contacted by the faculty member. |  |  |  |  |  | اختر من0-4 لتحديد عدد المرات التي قام المشرف الأكاديمي بالتواصل معك خلال فترة التدريب. | 16 |
| 17 | Overall, the supervision process by the faculty member was satisfactory. |  |  |  |  |  | بشكل عام عملية الاشراف من قبل المشرف الأكاديمي كانت مرضية. | 17 |
|  | **Field Instructor** | **المشرف الميداني** |  |
| 18 | The field instructor discussed the major points that I needed to be aware of at the beginning of the training course. |  |  |  |  |  | يناقش المشرف الميداني الأمور المهمة بداية التدريب المتعلقة ببرنامج التدريب.  | 18 |
| 19 | The field instructor showed interest in training the students. |  |  |  |  |  | يُظهر المشرف الميداني رغبة في التعامل مع الطلبة المتدربين. | 19 |
| 20 | The field instructor provided me advice and guidance with regards to the tasks assigned to me. |  |  |  |  |  | يقدم لي المشرف الميداني الارشاد والتوجيه المتعلقان في المهام الموكلة إلي. | 20 |
| 21 | The field instructor provided me with the help and support needed when facing any difficulties. |  |  |  |  |  | يقوم المشرف الميداني بتوفير المساعدة للطالب في مواجهة أي معضلة يوجهها من قبل أي طرف خلال الفترة. | 21 |
| 22 | The field instructor played a major role in the success of the training course. |  |  |  |  |  | للمشرف الميداني دور كبير في عملية نجاح برنامج التدريب. | 22 |
| 23 | The field instructor provided me with constructive feedback. |  |  |  |  |  | زودني المشرف الميداني بردود فعل بناءة. | 23 |
| 24 | Overall, the supervision process by the field instructor was satisfactory. |  |  |  |  |  | بشكل عام عملية الاشراف من قبل المشرف الميداني كانت مرضية. | 24 |
|  | **Training Organization** | **جهة التدريب** |  |
| 25 | The training organization suited my capabilities and aspirations. |  |  |  |  |  | تناسب جهة التدريب التي عملت بها قدراتي وتطلعاتي.  | 25 |
| 26 | The training organization was flexible with regards to assigning tasks and responsibilities.  |  |  |  |  |  | تتسم جهة التدريب بالمرونة من حيث اختيار المهام وتكليف الواجبات. | 26 |
| 27 | The training organization supports students and cares about benefiting them. |  |  |  |  |  | تهتم جهة العمل بشكل كبير بالطالب ومدى استفادته خلال فترة التدريب. | 27 |
| 28 | The training organization depends significantly on the student for accomplishing its daily tasks. |  |  |  |  |  | تعتمد جهة التدريب على الطالب بشكل كبير في تسيير أعمالها اليومية. | 28 |
| 29 | The training organization provided students with a designated area to meet with the field instructor to receive advice and guidance. |  |  |  |  |  | توفر جهة التدريب مكان خاص داخل المنظمة يلتقي فيه المشرف مع الطلبة لتوجيههم وإرشادهم. | 29 |
| 30 | Do you recommend sending future students to train at this organization? |  |  |  |  |  | تنصح بالاستمرار مع هذه الجهة لتوفير فرص تدريبية مستقبلية للطلاب. | 30 |
| 31 | I felt consolidated with the employees at the training organization. |  |  |  |  |  | شعرت بالاندماج مع العاملين في مكان التدريب. | 31 |
| 32 | The working atmosphere was positive and encouraging.  |  |  |  |  |  | كان مناخ العمل إيجابياً ومشجعاً. | 32 |
| 33 | Overall, how satisfied are you with the field experience training? |  |  |  |  |  | بشكل عام، كيف تقيم رضاك عن تجربة التدريب الميداني؟ | 33 |

## **Evaluation Form 3:** Faculty Member Evaluation Form

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Criteria | 5 | 4 | 3 | 2 | 1 | 0 | Mark |
| Orientation Session | The student attended the session **on time** and **has good understanding** of the course material. | The student attended the session **on time** and **reviewed** the course material. | The student attended the session **on time and highly engaged.** | The student attended the session **late but engaged.** | The student attended the session **late and did not engage.** | The student **did not attend** the session. | Out of 5 |
| Overall Communication and Engagement | The student has **excellent levels** of communication and **always** meets deadlines. | The student has **high levels** of communication and **meets** deadlines. | The student has **good levels** of communication and **tries to** **meet** deadlines. | The student has **low levels** of communication and has **difficulty** **in meeting** deadlines. | The student has **poor levels** of communication and **delays** meeting deadlines. | The student has **poor levels** of communication and **does not meet** deadlines. | Out of 5 |
| Evaluation of the Field Visit | The student:* Attended the scheduled field visit **on time.**
* Showed **excellent** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit.
* Showed **high** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit.
* Showed **good** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit **late.**
* Showed **low** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit **very** **late.**
* **Poorly** described tasks assigned.
 | The student did not attend the scheduled field visit. | Out of 10 |

## **Evaluation Form 4:** Field Instructor Evaluation Form

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No | Evaluation Elements | لا أوافقبشدةStrongly Disagree | لا أوافقDisagree | محايدNeutral | أوافقAgree | أوافق بشدةStrongly Agree | عناصر التقييم | م |
|  |  | **0** | **1** | **2** | **3** | **4** |  |  |
|  | **Professional Behavior** |  | **السلوك المهني** |  |
| 1 | Professional appearance  |  |  |  |  |  | المظهر العام  | 1 |
| 2 | Seeks responsibility |  |  |  |  |  | تحمل المسؤولية | 2 |
| 3 | Punctuality |  |  |  |  |  | الالتزام بأوقات الحضور والانصراف | 3 |
| 4 | Motivation (e.g., enthusiasm, attitude towards duties) |  |  |  |  |  | الجدية والحماس في التدريب | 4 |
|  | **Professional Relations** |  | **العلاقات المهنية** |  |
| 5 | Rapport with staff and co-workers |  |  |  |  |  | العلاقة مع الزملاء | 5 |
| 6 | Interaction with the public (i.e., clients, participants, patients) |  |  |  |  |  | العلاقة مع الآخرين كالعملاء أو المرضى أو المشاركين | 6 |
| 7 | Adaptability (e.g., adjusts plans/actions according to situation) |  |  |  |  |  | القدرة على التكيف | 7 |
|  | **Professional Performance** |  | **الأداء المهني** |  |
| 8 | Task accomplishment  |  |  |  |  |  | إنجاز المهام | 8 |
| 9 | Ability to verbally describe tasks assigned |  |  |  |  |  | القدرة على العرض الشفوي لمهام العمل | 9 |
| 10 | Ability to work individually |  |  |  |  |  | القدرة على العمل بصورة مستقلة | 10 |
| 11 | Ability to work in a team |  |  |  |  |  | القدرة على العمل ضمن فريق عمل | 11 |
| 12 | Follow regulations of training organization |  |  |  |  |  | اتباع تعليمات وأنظمة جهة التدريب | 12 |
| 13 | Accepts and follows instructions of the field instructor |  |  |  |  |  | تقبل واستيعاب ملاحظات المشرف الميداني | 13 |
|  | **Professional Knowledge** |  | **المعرفة المهنية** |  |
| 14 | Understanding of work environment's goals and operations  |  |  |  |  |  | فهم أهداف وطبيعة بيئة العمل | 14 |
| 15 | Keen to learn and perform a variety of tasks |  |  |  |  |  | الرغبة في التعلم وتولي مهام متنوعة | 15 |

**Field Instructor use for Evaluation form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Student Name** |   |  | **Stamp** |
| **Student ID** |   |  |  |
| **Name of Organization** |  |  |  |
| **Name of Supervisor** |  |  |  |
| **Email** |  | **Phone** |  |  |  |
| **Signature** |  | **Date** |  |  |  |

# Appendix1

## Practical Training Registration

|  |  |
| --- | --- |
| **Student Name** |  |
| **Student ID** |  |
| **Major** |  |
| **Training Organization** | Name:Address: |
| **Training Supervisor Contact Details** | Name:Designation:Department:Email:Telephone #: |
| **Trainee Responsibilities** | 1.2.3.4.5. |
| **Work Hours** | Per Week:Total Work Hours: |
| **Joining date** |  |

**BY THE TRAINING ORGANIZATION REPRESENTATIVE:**

By signing this registration form, I understand that:

* + The student is required to undergo rigorous formal training in the responsibilities mentioned above for the agreed hours.
	+ Any update about student, his performance, behaviour would be promptly communicated to college via assigned email address and will be kept confidential from the student.
	+ The organization understands that student responsibilities in the organization are purely voluntary and no monetary exchange is mandated by the college.
	+ In case of any information furnished by the student proving wrong, both parties have right to terminate the training program after intimation.

*Trainee Supervisor Name:*

*Trainee Supervisor Designation:*

*Trainee Supervisor Signature:*

**BY THE STUDENT:**

I hereby state that all information provided above is correct and the responsibility of its authenticity solely lies on me. In case of any fallacious information, college hold the right to cancel the training registration.

*Student Name*

*Student ID*

*Student Signature*

**Comments:**

Job Vacant Trainee Availability? Stamp

󠄀 Yes, we can accept \_\_\_\_\_\_\_\_\_ trainees

󠄀 No

**Submission Instruction:**

The student-training supervisor, after getting the details filled in, is required to sign and stamp the document and get it signed from the student as well. After completing, the training supervisor is requested to send the scanned form on following email address and the course supervisor: caf.coop@seu.edu.sa Field Experience Training Guide (from the quality department).pdf

**Note:** Without receiving of filled registration form, the college will assume the training not to have initiated.

# APPENDIX2

## Form No five - Evaluation of the Field Visit

|  |  |
| --- | --- |
| Student’s Name: | Student’s ID Number: |
| Training Organization: | Trainee department: |
| Trainee Supervisor Name: | Faculty Member: |
| Course: | CRN: |
| Visit Date: | Visit Time: |
| Semester:  | Academic Year: |

**For Instructor’s Use only**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Criteria | 5 | 4 | 3 | 2 | 1 | 0 | Mark |
| Evaluation of the Field Visit | The student:* Attended the scheduled field visit **on time.**
* Showed **excellent** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit.
* Showed **high** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit.
* Showed **good** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit **late.**
* Showed **low** ability to verbally describe tasks assigned.
 | The student:* Attended the scheduled field visit **very** **late.**
* **Poorly** described tasks assigned.
 | The student did not attend the scheduled field visit. | Out of 10 |

**Trainee Supervisor name Signature:**

**Faculty Member Signature:**

# APPENDIX 3

##  **Form Number (6): PREDICT REPORT**

**Internship Student Report | Month # ?**

**Start Date: \_\_\_/\_\_\_/\_\_\_ End Date: \_\_\_/\_\_\_/\_\_\_**

|  |  |
| --- | --- |
| Student’s Name: | Student’s ID Number: |
| Training Organization: | Trainee department: |
| Trainee Supervisor Name: | Faculty Member: |
| Course: | CRN: |
| Semester:  | Academic Year/Semester: |

**(Instructions)**

* This report must be submitted on Blackboard (**WORD format only**) via the allocated folder.
* **Email submission will not be accepted.**
* Your work should be clearly and completely presented; marks may be reduced for poor presentation. This includes filling your information on the cover page.
* Assignment will be evaluated through BB Safe Assign tool.
* Late submission will result in ZERO marks being awarded.
* This work should be your own, copying from students or other resources will result in ZERO marks.
* Use **Times New Roman** font 12 for all your answers.

**(Report Components)**

|  |  |
| --- | --- |
| Task(s) | **What are the activities and tasks given to you during this month?** |
|  |
| New skill(s) | **What skills did you learn through the month?** |
|  |
| Meeting(s) | **How many meetings did you attend?** |
|  |
| Difficulty/ Challenge(s) | **What are the difficulties you had this month?** |
|  |
| **How did you overcome these difficulties?** |
|  |
| Learning | **What did you learn from completing the tasks** |
|  |
| **What did you want to learn more?** |
|  |

\*Note:

1. This report is a summary of the training activities performed.

2. You may attach additional pages if needed. And student can attach any extra note to this form.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# APPENDIX 4

## Academic Report Guideline (Co-op) Cover page form

The purpose of the Internship Report is offer students to describe their accomplishments and demonstrate what they learned through participation at Saudi Electronic University. The report should be submitted within two weeks after you finish your Co-op training Program. In addition, the report should be approximately **3000 – 4000,** single –spaced and consider taking the following format

#### First Page

First page should display student’s full name, internship start and finish dates, working hours per week, company/institution name.

This page should be signed by the work and university supervisor off the intern student.

|  |  |
| --- | --- |
| Student`s name : |  |
| Student`s ID # : |  |

|  |  |
| --- | --- |
| Training Organization: | Trainee Department: |
| Field Instructor Name: | Faculty Member: |
| Field Instructor Signature: | Faculty Member Signature: |
| Internship Start Date: | Internship End Date: |
| Course: | CRN: |
| Academic Year/Semester: |  |