

**Trainee Assessment Form for
BA-Students in Social Work (M8)**
(to be filled in by the training organisation)

The practical training of Ms/Mr _____ in our organisation took place from _____ to _____. Ms/Mr was _____ number of days absent.

1. Ms/Mr _____ fulfilled all requirements of the training targets as laid out in the Practical Training Regulations of the Protestant University of Applied Sciences Darmstadt, dated 28 March 2008.

Yes

No, not entirely, because _____

2. Ms/Mr _____ worked well with her/his supervisor, with the immediate superior as well as with the other colleagues in our organisation.

Yes

No, not entirely, because _____

3. Ms/Mr _____ worked well with the clients of our organisation.

Yes

No, not entirely, because _____

Additional comments:

Place, date

Stamp, signature training organisation