

Practical semester(Internship) Company Evaluation form

2019학년도 1학기

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|-------------------------|--|---------------|--|
| Department | | Grade(year) | |
| Student ID | | Name | |
| Internship company name | | Assigned Task | |

- Evaluation of the head of the department -

| PART | OPINION | GRADE | |
|--------------------------------|---------|---------|-------|
| | | PERFECT | SCORE |
| ① Diligence | | 25 | |
| ② Collaboration | | 25 | |
| ③ Creativity | | 25 | |
| ④ Field Adaptation Achievement | | 25 | |
| TOTAL | | 100 | |

| | | |
|-------|-----------|-----------------|
| JUDGE | POSTION : | NAME: (SIGN) |
|-------|-----------|-----------------|

※ This evaluation must be submitted to the advisor before the beginning of the final exam.