

WORKPLACE HOST EVALUATION FORM

Name of Job Shadow Person _____

Name of Business _____

Thank you for participating in *Exploring Atchison County Business and Industry: Job Shadow Day!* Please complete this brief evaluation and return it to Tracy A Cooper, High School Counselor at Tarkio High School. We will use the evaluation to improve the program.

Please rate the following on a scale of 1 through 5 (a 1 indicates that you strongly agree with the statement, and 5 indicates that you strongly disagree).

	1) Strongly Agree-----5) Strongly disagree				
	SA				SD
I was well prepared to be a Workplace Host.	1	2	3	4	5
Today, I gained a new perspective about my job.	1	2	3	4	5
I was at ease interacting with my student throughout the day.	1	2	3	4	5
I enjoyed my experience and would be willing to do it again.	1	2	3	4	5
I would recommend Job Shadowing to other employees.	1	2	3	4	5

For successful Job Shadowing experiences in the future, you might:

What should we discontinue doing?

How could we better support you throughout your experience?

Please list any additional comments:
