Career Link

Student Name:	
Shadow Date:	
Occupation:	
Business:	

Using the following scale of 1 to 5, please rate the CAREER LINK experience in the following areas:

5=	O	utstanding
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- 4=Beyond Expectations
- 3=Met Expectations
- 2=Below Expectations
- 1=Needs Improvement

1.	Overall Experience was well organized/planned. I benefited from the experience.	5 5	4 4	3 3	2 2	1 1
2.	Communication:					
	All of my questions were answered	5	4	3	2	1
	Employee Educator related well to me.	5	4	3	2	1
	Employee Educator demonstrated interest.	5	4	3	2	1

- 3. What type of work did you observe during your CAREER LINK experience?
- 4. What did you like best about your CAREER LINK experience?
- 5. What did you like least about your CAREER LINK experience?
- 6. Would you consider a career in this field? Why or Why not?

7. Do you plan to participate in CAREER LINK again? If so, when and for what occupation?

Staple to the Employer Evaluation and turn in.