

Practical semester(Internship) Company Evaluation form

학년도 학기

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	POSITION :	NAME: (SIGN)
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※ This evaluation must be submitted to the advisor before the beginning of the final exam.