



Supervision/workplace visit confirmation form for cooperative education

2<sup>nd</sup> semester, Academic year 2022

Company's name.....

Location.....

Telephone.....fax.....

Topics to be discussed in the 1<sup>st</sup> supervision

1. The students' job responsibilities and his/her work plan during on- the- job training.
2. Project topic and rough draft project report
3. Working skills and problems met during internship/on-the- job training
4. Listening to job supervisor's opinion regarding the guidelines and philosophy of Cooperative Education

Lists of Cooperative Education Students, 2<sup>nd</sup> semester, Academic year .....

No.	Students' full name	Students' programme	Job position/ job description
1			

The Schedule of Cooperative Education Supervision

No.	Date	Time
1		

List of Cooperative Education Advisors Visiting the Workplace from \_\_\_\_\_programme, Department of \_\_\_\_\_ Faculty of Liberal Arts, Rajamangala University of Technology Srivijaya

No.	Full name	Position	Telephone number
1			

The workplace has been informed of the date of the visit on the above-specified date and time and has thoroughly understood the aforementioned supervision procedures and would like to inform that:

[ ] The above specified schedule is a convenient time to welcome the visiting Cooperative education advisors.

[ ] We are inconvenient to welcome the Cooperation education advisors on the above-specified date and would like to change due date as follows.

No.	Date/month/year	Time

Please be informed accordingly,

Signature.....

(.....)

Position.....

Job mentor/ Job advisor