**SURVEY**

**evaluating the internship carried out during the studies
at the Faculty of Food Technology**

(to be completed by the Student after the internship)

*Fields with an asterisk \* are required.*

**PART I: GENERAL INFORMATION**

|  |  |
| --- | --- |
| Course \* |  |
| Form and level \* | 🞏 full-time 🞏 part-time🞏 bachelor’s degree 🞏 master’s degree |
| Year of studies \* |  |
| Academic year of the internship \* | 20……/20…… |
| Gender \* [[1]](#footnote-1) | 🞏 woman 🞏 man |
| Name or profile/type of the Institution hosting the internship \* [[2]](#footnote-2) |  |

1. **Was the information provided by the University complete and understandable (meetings, website) at the preparation stage for the internship? \***

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| definitely not |  |  |  |  |  |  |  |  |  |  |  | definitely yes |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |

Comments on point 1: ………………………………………………………………………….…………….…

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**Part II: IMPLEMENTATION OF THE INTERNSHIP**

1. **Did the host Institution adequately prepare the place/position for the internship? \***

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| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 1: ……………………………………………………………….……………………….…

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1. **Were you assigned a Company Internship Supervisor? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 2: ………………………………………………………………….…………………….…

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1. **Were you given the opportunity to carry out professional/technical tasks independently during your internship? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 3: ………………………………………………………………………….…………….…

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1. **During your internship, did you manage to acquire professional knowledge as part of your host Institution’s tasks? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 4: …………………………………………………………………………….………….…

...………………………………………………………………….….…………………..…………….…………………………………………………….….………………………….………….………………

1. **Was it possible to acquire organisational skills during your internship? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 5: ………………………………………………………………………………….…….…

...………………………………………………………………….….…………………..…………….…………………………………………………….…..…………………………………….………………

1. **Was it possible to develop social competences during your internship?** 1, 2

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 6: ……………………………………………………………………….……………….…

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**Part III: SUPERVISION OF THE TRAINEE**

1. **Did the Company Internship Supervisor provide you with information on the scope and methods of the tasks assigned and the requirements? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 1: ………………………………………………………………………….…………….…

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1. **In your opinion, did the person in the role of the Company Internship Supervisor have adequate knowledge and professional/specialist preparation? \***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| definitely not |  |  |  |  |  |  |  |  |  |  |  | definitely yes |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |

Comments on point 2: ……………………………………………………………………….……………….…

...………………………………………………………………….….…………………..…………….…………………………………………………….….…………………………………….……….………

1. **In your opinion, did the person in the role of the Company Internship Supervisor have the right soft skills (i.e. ability to pass on knowledge, friendliness, commitment)? \***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| definitely not |  |  |  |  |  |  |  |  |  |  |  | definitely yes |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |

Comments on point 3: ……………………………………………………………………….……………….…

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**Part IV: SUMMARY OF THE INTERNSHIP**

1. **Would you recommend a friend to have an internship at the host institution where your internship took place? \***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Comments on point 1: ……………………………………………………………………….……………….…

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1. **Did the internship meet your expectations? \***

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| definitely not |  |  |  |  |  |  |  |  |  |  |  | definitely yes |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |

Comments on point 2: ………………………………………………………………….…………………….…

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1. **In your opinion, was the time devoted to the internship adequate? \***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| definitely not |  |  |  |  |  |  |  |  |  |  |  | definitely yes |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |

Comments on point 3: ……………………………………………………………………….……………….…

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1. **In your opinion, were there any factors hindering your internship? If so, what are they?**

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1. **Do you think that changes should be made to the study programme or
the rules for the implementation of internships in the course?** **If so, what are they?**

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1. **Other comments and conclusions by the Student on the completed internship**

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1. *Please put a cross (X) in the appropriate box* [↑](#footnote-ref-1)
2. *It is suggested that the name of the host institution be entered as long as this allows the student to remain anonymous. Otherwise, enter the activity profile or type of Institution (e.g. brewery, hospital, dietary clinic, bakery, quality control laboratory, sanitary-epidemiological station, etc.).*  [↑](#footnote-ref-2)