Instructions: The purpose of this form is to document a site visit as required by the Federal Work Study Policies and Procedures. The Career Counselor must completely fill out Parts I and Parts II and interview the supervisor to answer Part III. The Supervisor may enter his/her comments in Part IV. The form must be signed by both the Counselor and the Supervisor.

I. Organization Information

Organization Name: ____________________________________________________________
Address: _____________________________________________________________________
City: __________________________ State: _______ Zip: ______________

II. Visit Information

Date Visited: ____________________ Campus: ________________________________
Quarter: Summer Fall Winter Spring
Met With: ________________________ Title: ________________________________
Career Services Counselor: ________________________________________________

III. Questionnaire

Student’s Working Conditions Satisfactory Unsatisfactory
Student’s Performance Satisfactory Unsatisfactory
Appropriate work being performed Yes No
Terms of the Agreement are being fulfilled Yes No

IV. Supervisor Comments

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

V. Signatures

_________________________________  _____________________________________
Career Counselor Organization Supervisor