



Host Employer:

SEVIS number: N _____

Exchange Visitor:

Supervisor:

This evaluation is required from all participants. This is a U.S. Department of State requirement of the program according to J-1 regulations. Please complete, sign this evaluation, and return it to AIPT prior to completion of program.

Exchange visitor: Please check the box that best describes your experience. Feel free to attach a separate sheet for additional comments.

Table with 4 columns: I am, Strongly Agree, Strongly Disagree, My Employer, Strongly Agree, Strongly Disagree. Rows include: 1. Meeting my training/internship objectives, 2. Learning new skills, 3. Building on my existing skills, 4. Becoming involved in activities in my local community, 1. Follows the training/internship schedule, 2. Shows interest in my progress, 3. Has helped with my transition, 4. Helps me understand U.S. customs and culture, My co-workers: 1. Are interested in my culture.

- 1. I received sufficient assistance with orientation to my community. [] Yes [] No
2. My training/internship program still meets my expectations. [] Yes [] No
3. I would recommend my U.S. host employer to future exchange visitors. [] Yes [] No
4. So far, I would rate my overall experience with my host employer as: [] Excellent [] Good [] Average [] Fair [] Poor
5. My area of greatest accomplishment so far has been: [] Improved English skills [] Career-related knowledge [] Understanding American Society [] Other
6. List any recommendations and/or suggestions you may have to improve AIPT's program.

Exchange Visitor Name and title (please print)

/ /

Exchange Visitor's signature (required)

Date

Please turn over page to complete evaluation.

Supervisor: Please check the box that best describes your response regarding your exchange visitor.

Please rate your exchange visitor's:	Excellent					Poor					My exchange visitor is:	Strongly Agree					Strongly Disagree				
1. Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Dependable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude toward assigned duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Punctual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Application of skills to duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Beneficial to my business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Language fluency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Following the training schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Quality of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	About AIPT:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Adaptability to work conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. The program is beneficial to my business					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Overall performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Materials provided to me were clear and helpful					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Is exchange visitor receiving the number of training/internship hours as stated in the Training/Internship Placement Plan? Yes No

Is the exchange visitor receiving on-the-job training as stated in the Training/Internship Placement Plan? Yes No

Supervisor name and title *(please print)*

/ /

Supervisor signature *(required)*

Date