

# LORD BYNG SECONDARY SCHOOL

## Take Our Kids to Work Day 2019 — Student Evaluation

Student evaluation **MUST** be submitted for Health and Career Education credit.

Name: \_\_\_\_\_ Student #: \_\_\_\_\_

Name of Company or Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Host: \_\_\_\_\_ Supervisor's Phone #: \_\_\_\_\_

1. Briefly describe the workplace that you visited.
  
  
  
  
  
  
  
  
  
  
2. Describe your activities throughout your day.
  
  
  
  
  
  
  
  
  
  
3. Would you like to do this sort of work in the future? Why or why not?
  
  
  
  
  
  
  
  
  
  
4. What was the most significant thing you learned from this job shadow experience?

**Please return this completed form to Ms. Smith (or in the tray on her door)  
by Thursday, November 7th.  
Marks will be deducted for late submissions until November 15<sup>th</sup>.  
After November 15<sup>th</sup> no marks will be given.**