The activity directly below is included with permission from CAMOSUN COLLEGE

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| **NAME:** | **DATE:** |
| **Please take the time to reflect on your work experience:** | |
| * Some new things you learned. | * How you felt when you started and finished. |
| * People you met. | * Any problems you encountered. |
| * Any skills that you feel you have gained. | * Any skills that you feel you can improve on. |
| * Were you late, early, on time? | * Any questions to ask employer or instructor. |
|  |  |
| **NAME OF EMPLOYER:** | **HOURS OF WORK EXPERIENCE:** |
|  |  |
| **How did you feel when you started work?** | (poor) 1 2 3 4 5 (okay) 6 7 8 9 10 (great) |
| **How did you feel when your shift ended?** |  |
| **What was the best part of the day?** | |
|  | |
|  | |
| **What tasks did you do at work today? List at least 3.** | |
|  | |
|  | |
| **What else do you want to tell us about today?** | |
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