

**Post-Job Shadow
Confirmation/Evaluation Form**



Junior Job Shadow Day 2019

Due January 31st, 2019

Student: _____ Student ID: _____

Business Name: _____

Address: _____

Phone: _____ Email: _____

Job Shadow Start Time: _____ End Time: _____

Contact Person/Title: _____

Signature: _____

Please respond to the following items:

Student arrived on time.	Yes	No	Student's attire was appropriate.	Yes	No
Student participated.	Yes	No	Student's behavior was appropriate.	Yes	No
Would you be willing to host a student for a Job Shadow again?	Yes	No			

Post-Job Shadow Reflection

What work activities did you observe?

What did you like most/least about your Job Shadowing experience?

Would you consider a career in the area you visited? Yes No

*****Important Information*****

Completed confirmation/evaluation forms must be turned into the Counseling Office or College and Career Center (back of LRC) by January 31st, 2019, or the Job Shadow Day will result in an unexcused absence.