



# **Internship Report**

## **Work-based Education**

# **(WBE)**

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**LA-CEB Student**

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**Personal Data**

**Student ID** : .....

**Name** : .....

**Company** : .....

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## Preface

This internship report is designed to engage students, visiting lecturers, and mentors with regulations and general practices of work based education. It should be used as a daily record for students.

During the internship students are required to bring this report to internship sites everyday to ensure that all daily tasks are recorded and verified by their mentors. The students must also present it to the supervising lecturers when they are on a site visit. Students are recommended to study the report thoroughly to keep up with the work and lessons they have learned. After completing the internships, students should ensure all documents are completely filled and submit this report to the course lecturer.

Course lecturer  
Communicative English for Business,  
Faculty of Liberal Arts,  
Panyapiwat Institute of Management

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## Student's Portfolio

### Description

Subject Code ..... Subject Title .....

Semester ..... Academic Year .....

Advisor's Name-Surname..... Tel. ....

Instructor's Name-Surname ..... Tel. ....

### Internship Period

Starting Date ..... Month ..... Year .....

Ending Date ..... Month ..... Year .....

### Background

Student ID .....

Name (In Thai)..... Surname.....

Name (In English)..... Surname.....

Address .....

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.....Tel. ....

E-mail :.....

### Background of Internship Site

Internship Company .....

Address .....

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Host Name-Surname .....

Position .....

Tel: ..... E-mail.....

Mentor's name: .....

Position:.....

Tel: ..... E-mail.....

## Measurement /Evaluation

### 1. Learning-outcome evaluation

No.	Evaluation activities	Percentage of Evaluation (%)	Assessor(s)
1	Internship site	60	Mentor(s)
2	Course evaluation	40	Course lecturer(s) / WBE Committee(s)
<b>Total</b>		<b>100 Marks</b>	

### 2. Evaluation criteria: use the criterion-referenced evaluation as follows;

Marks	90-100	=	A
Marks	85-89	=	B+
Marks	80-84	=	B
Marks	75-79	=	C+
Marks	70-74	=	C
Marks	65-69	=	D+
Marks	60-64	=	D
Marks	0-59	=	F

## Internship Rules and Regulations

### Rules and Regulations of Panyapiwat Institutes of Management

1. Students have to strictly wear the full student uniform assigned by the institute, except when the internship site provides a particular uniform for employees and/or trainees.
2. Before taking any official leave(s) or annual leave(s), students must notify their immediate supervisor(s).
3. Students are not allowed to do other jobs during the internship.
4. Students are not allowed to change the internship site.

### Rules and Regulations of the Internship Site

1. Students are not to be absent from work, take official leave(s) / annual leave(s), or attend late for work without notifying the mentor(s).
2. Students should dress properly following the regulations of internship sites.
3. Students should cooperate with/participate in internship sites' activities.
4. Students must strictly follow rules and regulations of internship sites.

### Training hours for internship

Shift : morning    clock-in ..... clock-out .....

Shift : afternoon    clock-in ..... clock-out .....

Shift : night    clock-in ..... clock-out .....

No.	DD/MM/YY	Clock-in	Clock-out	Mentor's signature	Total of Hours	Remarks
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
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18						
19						
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21						
22						
23						
24						
25						
26						
27						

No.	DD/MM/YY	Clock-in	Clock-out	Mentor's signature	Total of Hours	Remarks
28						
29						
30						
31						
32						
33						
34						
35						
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57						
58						
59						



No.	DD/MM/YY	Clock-in	Clock-out	Mentor's signature	Total of Hours	Remarks
60						
61						
62						
63						
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67						
68						
69						
70						
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72						
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90						
91						

No.	DD/MM/YY	Clock-in	Clock-out	Mentor's signature	Total of Hours	Remarks
92						
93						
94						
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122						
123						

No.	DD/MM/YY	Clock-in	Clock-out	Mentor's signature	Total of Hours	Remarks
124						
125						
126						
127						
128						
129						
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131						
132						
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148						
149						
150						

Total: Attendance \_\_\_ day(s)/ Absence \_\_\_\_\_ day(s)/ late \_\_\_ day(s) / early leave \_\_\_ day(s) / others \_\_\_ day(s)

Training hours: \_\_\_\_\_

## Weekly Report

### 1. Assigned Tasks

Week 1

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THU \_\_ / \_\_ / \_\_

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Sign..... Mentor

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 2

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3 Problem-solving methods

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Evaluation/Assessment date

## Weekly Report

Week 3

### 1. Assigned Tasks

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TUE \_\_ / \_\_ / \_\_

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WED \_\_ / \_\_ / \_\_

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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Evaluation/Assessment date

## Weekly Report

Week 4

### 1. Assigned Tasks

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2 Problems during work hours

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3 Problem-solving methods

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 5

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 6

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2 Problems during work hours

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 7

### 1. Assigned Tasks

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Evaluation/Assessment date

## Weekly Report

Week 8

### 1. Assigned Tasks

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 9

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Evaluation/Assessment date

## Weekly Report

Week 10

### 1. Assigned Tasks

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Evaluation/Assessment date

## Weekly Report

Week 11

### 1. Assigned Tasks

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Evaluation/Assessment date

## Weekly Report

Week 12

### 1. Assigned Tasks

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 13

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 14

### 1. Assigned Tasks

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 15

### 1. Assigned Tasks

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 16

### 1. Assigned Tasks

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TUE \_\_ / \_\_ / \_\_

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WED \_\_ / \_\_ / \_\_

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 17

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 18

### 1. Assigned Tasks

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TUE \_\_ / \_\_ / \_\_

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WED \_\_ / \_\_ / \_\_

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

### 1. Assigned Tasks

Week 19

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

## Weekly Report

Week 20

### 1. Assigned Tasks

MON \_\_ / \_\_ / \_\_

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TUE \_\_ / \_\_ / \_\_

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WED \_\_ / \_\_ / \_\_

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2 Problems during work hours

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3 Problem-solving methods

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4 Impressive or interesting circumstance(s)/ situation(s)

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5 Courses or contents that have been studied and can be applied to work.

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Evaluation/Assessment date

สรุปผลการฝึกปฏิบัติงาน (Summary Report)

1. Things the students have learnt from working there

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### 3. Analysis of the organizational culture

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### 4. Analysis of customer behavior (\*If the assigned tasks are involved with services)

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### Sick Leave Application (1<sup>st</sup> time)

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

### Sick Leave Application (2<sup>nd</sup> time)

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

### Sick Leave Application (3<sup>rd</sup> time)

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)  
Checked Date...../...../.....

Sign..... Head of Department  
(.....)  
Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

### Sick Leave Application (4<sup>th</sup> time)

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)  
Checked Date...../...../.....

Sign..... Head of Department  
(.....)  
Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.



Other forms: Spare 1

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

*Remarks:*

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

Other forms: Spare 2

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

*Remarks:*

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

Other forms: Spare 3

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

Other forms: Spare 4

Dear .....

My full name is: ..... My training position is: .....

Name of internship site: .....

Reasons for sick leave: .....

I have a medical certificate from ..... (the hospital's name).

I do not have a medical certificate because .....

From (date)..... to (date)..... Total:.....day(s)..... hour(s).

I hereby certify that the information mentioned above is true and correct.

Supervisor's comments (from the internship site)

Approve     Not Approve

.....

Sign .....

(.....)

Checked Date...../...../.....

Sign ..... Course Lecturer  
(.....)

Checked Date...../...../.....

Sign..... Head of Department  
(.....)

Checked Date...../...../.....

**Remarks:**

- As the regulations of the department, students are allowed to have only 4 sick leaves during the internship (4 months). All students have acknowledged this information.
- After this document is signed by their mentors, students have to submit this document and other relevant documents regarding their sick leaves via channels, according to department's policy.

Attach a medical certificate here (1<sup>st</sup> time)

Attach a medical certificate here (2<sup>nd</sup> time)

Attach a medical certificate here (3<sup>rd</sup> time)

Attach a medical certificate here (4<sup>th</sup> time)

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Internship-visit Report

Comments on internship-visit (1<sup>st</sup> time)

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Sign ..... Visiting Lecturer 1  
(.....)

Sign..... Visiting Lecturer 2  
(.....)

Sign ..... Head of Department  
(.....)

Visited Date ...../...../.....

Comments on internship-visit (2<sup>nd</sup> time)

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.....  
.....  
.....

Sign ..... Visiting Lecturer 1  
(.....)

Sign..... Visiting Lecturer 2  
(.....)

Sign ..... Head of Department  
(.....)

Visited Date ...../...../.....

Internship Company.....Internship Period.....  
 Student's name-surname.....Student's ID.....Year.....

*Remarks:* After evaluating and commenting, please return the form to [tanapornphu@pim.ac.th](mailto:tanapornphu@pim.ac.th) (Ms. Tanaporn Phurinan) or visiting lecturer at the date of an internship visit.

Evaluation Topics	Scoring Criteria	Score	Remarks
<b>Competence and Proficiency</b>			
1. Able to learn new things and adapt to work including ability to operate office computer software efficiently.	6		
2. Possess communicative skills (Both in Thai and English); have interpersonal skills	10		
3. Able to make decision and deal with unexpected problems	6		
<b>Responsibility</b>			
4. Able to manage assigned task	6		
5. Come to work on time and regularly	6		
6. Have service mind with colleagues and customers	10		
<b>Personalities</b>			
7. Able to get along with people in an appropriate way; well groom;	6		
8. Demonstrate positive thinking and dedication to complete the assigned task	10		
<b>รวม</b>	<b>60</b>		

Workplace opportunities for English speaking workers  Most  Moderate  low

\* Intern's total working hours  hours

(The minimum required working hours for Communicative English for Business department is.....hours and.....weeks.)

**Further Comments**

.....  
 .....  
 .....

Student's abilities or skills that needs to be improved for an internship in your department  
 (please specify.)

.....  
 .....  
 .....

Signature ..... mentor  
 (.....)

Tel. .... e-mail .....

Tanaporn Phurinan (Numpetch)  
 Officer of Counseling and Career Development Center for Students (CCDS),  
 Faculty of Liberal Arts, Panyapiwat Institute of Management  
 Tel.: 09-5950-1407  
 E-mail: tanapornphu@pim.ac.th

Communicative English for Business program would like to extend thankfulness for giving comments and great opportunities for students to acquire work experience at your department.