**Company’s assessment survey**

**Company’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company’s address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Trainee’s name and surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1) How would you evaluate the competence level of your trainee?
 (0 to 5)
 a) theoretical knowledge ⃝ ① ② ③ ④ ⑤
 b) specific knowledge of the company’s field ⃝ ① ② ③ ④ ⑤
 c) applied knowledge and problem solving ⃝ ① ② ③ ④ ⑤
 d) learning skills ⃝ ① ② ③ ④ ⑤
 e) computer skills ⃝ ① ② ③ ④ ⑤
 f) communication skills in Italian and English language ⃝ ① ② ③ ④ ⑤
 g) work -team abilities ⃝ ① ② ③ ④ ⑤
 h) abilities to process and present data ⃝ ① ② ③ ④ ⑤

2) Have you got any advices to improve the students’ training in order to facilitate their entry into the job market?
 - No [ ]
 - Yes [ ]
 - If yes, which ones?

3) Would you be available to cooperate with the sending institution as to organize and manage:
a) dedicated training courses for students to develop their professional skills within your market field?
 - Yes [ ]
 - No [ ]

b) courses aimed to the specialized qualification for legal professional practice?
 - Yes [ ]

- No [ ]

Thank you for you kind cooperation.

 Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Company’s Stamp