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4.9 Academic mentor's monitoring form

4.9.1 General information

Student					
Student's name:					
Home Address:					
City:	ID student number:				
E-mail:	Gender:	Male	Female		
Telephone number:	Home tele	ephone number			
Academic institution					
University:					
Faculty:					
Address:		City:			
Academic mentor's name:		Position:			
E-mail:	Telephone number:				
Hosting institution (enterprise/company)					
Name of Company:					
URL:					
Address:		City:			
Industrial mentor's name:		Position:			
E-mail:	Telephone number:				

4.9.2 Opinion of academic mentor

Mentor ²	s visits			
Date:	From:	To:		
dd/mm/gggg	hh.ss	hh.ss		
Date:	From:	To:		
dd/mm/gggg	hh.ss	hh.ss		
Date:	From:	To:		
dd/mm/gggg	hh.ss	hh.ss		
Date:	From:	To:		
dd/mm/gggg	hh.ss	hh.ss		
List of questions on student a	nd the organization	on of practice		
Is the work challenging?			Yes	No
Is the work of relevance to the student's course of study?			Yes	No
Are there well-defined work targets to be achieved?			Yes	No
Was the cooperation with industrial mentor well?			Yes	No
Was there proper support and supervision?			Yes	No
Are Health and Safety matters being addressed in the student's workplace?			Yes	No
Has the student written a regular the Diary of practical placement?			Yes	No
Has the student regularly reported (by e-mails) about his/her practice progress?			Yes	No



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Academic mentor's comments
Comments on the student's performance and on the achievements in the PPP?
Any other comments
Academic mentor's student practical placement assessment, based on visits and contacts
with industrial mentor
Excellent (10),
Very Good (9),
Good (8),
Satisfactory (7),
Sufficient (6),
Poor (5)
1 001 (0)
Date: Place:
Academic mentor signature: