

Instructions: You complete and return this form every semester of your internship; see the HC calendar for due dates. Please see the CECS494HCX syllabus, posted at the HC website, regarding file naming convention and submission procedures.



Honors Co-Op Student Information Return for the Current Semester

Last name:		First name:	
Major:	CSUN Id:	Semester:	Date:
CSUN email:			
Home street address:			Apt #:
Home City:			Zip:
Home Phone:		Cell:	
Work Phone:		Work email:	
Company name:		Supervisor's name:	
Supervisor's Phone:		Supervisor's email:	

Summarize your assignments for this semester. Don't include work from previous semesters

Was the work technical in nature? If not, did you discussed the issue with your supervisor?

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Which courses, if any, helped you in learning the new skills and technologies needed to do your work for this semester?

What would have better prepared you for this semester's work? Include anything relevant and practical such as CSUN courses, activities, books, seminars, conferences, workshops, etc.

Any other comments, including how the program can be improved for future interns (Optional):

Best days and times for your faculty advisor to visit you at work

Was your work environment satisfactory?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Were you treated as a member of a professional team?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Would you work for this company after graduation?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Were you able to learn from others?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Were you able to talk to your supervisor when needed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>