

**Union Christian Academy  
Business Host Post-Shadow Evaluation**



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Name of Host \_\_\_\_\_ Organization \_\_\_\_\_

Date \_\_\_\_\_

Student(s) Hosted \_\_\_\_\_

Career(s) Explored \_\_\_\_\_  
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|---------------------------------------------------------------------------|-----|----|
| 1. <u>Did the student arrive on time?</u>                                 | YES | NO |
| 2. <u>Did the student dress appropriately?</u>                            | YES | NO |
| 3. <u>Did the student ask appropriate questions?</u>                      | YES | NO |
| 4. <u>Did the student act properly?</u>                                   | YES | NO |
| 5. <u>Do you feel the student was interested in the job?</u>              | YES | NO |
| 6. <u>Did the student gain a better understanding of the career area?</u> | YES | NO |
| 7. <u>Did you enjoy working with the student?</u>                         | YES | NO |
| 8. <u>Did the student interfere negatively with normal operations?</u>    | YES | NO |

If yes, please comment.

9. How did you feel that you have helped the student? Please comment.

10. Please comment on your overall reaction of the job-shadowing program. Please feel free to comment on improvements you feel should be made. You may write your comments on the back of this document or email thoughts to Sarah Jones, Guidance Counselor, at [sarah.jones@unionchristianacademy.org](mailto:sarah.jones@unionchristianacademy.org)

**Thank you for providing this opportunity to a UCA student!**

Signature of host: \_\_\_\_\_

**Please return this evaluation to Union Christian Academy. You can mail it, hand this evaluation to the student to return to the school, or scan and email to [sarah.jones@unionchristianacademy.org](mailto:sarah.jones@unionchristianacademy.org). Thank you for your assistance.**