COMMUNITY CONNECTIONS CONFIRMATION

Sutherland Secondary School

1860 Sutherland Avenue North Vancouver, BC V7L 4C2 Tel: 604-903-3500

TO BE FILLED OUT BY THE STUDENT:
STUDENT NAME:
GRADE: NUMBER OF COMPLETED HOURS:
DATE(S)/MONTH HOURS COMPLETED:
NAME OF COMPANY/ ORGANIZATION:
ADDRESS:
SPECIFIC JOB OR DUTY PERFORMED:
COPY/PROOF: DOCUMENTATION OF WORK/ VOLUNTEER/ COMMUNITY EXPERIENCE OR SERVICE
(ATTACH TO THIS DOCUMENT):
LETTER PAY SLIP LOG SHEET THANK YOU CARD PHOTO CERTIFICATE
OTHER
SUPERVISING ADULT INFORMATION:
NAME OF SUPERVISING ADULT:
EMAIL:
CONTACT PHONE NUMBER:



STUDENT SELF-EVALUATION OF EMPLOYABILITY SKILLS

- 4 Excellent (exceeds expectations)
- 3 Good (consistently meets expectations)
- 2 Satisfactory (meets minimum expectations)
- 1 Needs improvement (does not meet expectations)

		Studer	nt's nam	ie:		
FUNDAMENTAL SKILLS						
1. Communicate						
a) Read & understand	4	3	2	1	N/A _	
b) Write & speak	4	3	2	1		
c) Listen & ask questions	4	3	2	1	N/A _	
d) Use info technology	4	3	2	1	N/A _	
2. Manage Information						
a) Gather & organize info	4	3	2	1		
b) Analyze & apply knowledge	4	3	2	1	N/A _	
3. Numeracy						
a) Extract & record numeric data	4	3	2	1	N/A _	
b) Perform calculations	4	3	2	1	N/A _	
4. Think & Solve Problems						
a) Recognize problems that occur	4	3	2	1	N/A	
b) Identify & apply solutions	4	3	2	1	N/A	
c) Evaluate effectiveness of decisions	4	3	2	1		
PERSONAL MANAGEMENT SKILLS						
5. Positive Attitudes & Behaviours						
a) Self-esteem & confidence	4	3	2	1	NI/A	
b) Honesty, integrity & ethics	4	3	2	1	N/A	
c) Appropriate grooming & attire	4	3	2	1	N/Δ _	
d) Independent & resourceful	4	3	2	1		
6. Responsibility	4	2	0	4	N1/A	
a) Balance work & personal life	4	3	2	1		
b) Punctuality & attendance	4 4	3 3	2 2	1 1	N/A _	
c) Accountable & reliable	4	3	2	ı	IN/A _	
7. Adaptability						
 a) Adjust readily to change 	4	3	2	1		
b) Ability to multitask	4	3	2	1	N/A _	
8. Learn Continuously						
a) Set learning goals	4	3	2	1	N/A _	
b) Keen to learn new things	4	3	2	1		
9. Work Safely						
a) Follow safe work practices	4	3	2	1	N/A _	
TEAMWORK SKILLS						
10. Work with Others						
a) Respect individual differences	4	3	2	1	N/A	
b) Accept constructive feedback	4	3	2	1		
c) Skill to be a team member	4	3	2	1		
11 Postiningto in Punicate 9 Tests						
11. Participate in Projects & Tasks	4	2	2	4	NI/A	
a) Use of appropriate tools & tech.b) Operation of equipment	4	3 3	2	1		
c) Treat equipment with care	4 4	3	2 2	1 1	N/A _	
o) Treat equipment with care	4	3	2		IN/A _	

COMMUNITY CONNECTIONS REFLECTION

TO BE FILLED OUT BY THE STUDENT

STUDENT NAME:	_GRADE:
Why did you participate in this activity?	
Describe any teamwork skills used in your work/volunteer experience.	
3. Describe the fundamental skills used in your work/volunteer experience.	
4. Describe the personal management skills used in your work/volunteer experience.	
5. How does this work or volunteer experience benefit the community?	
6. How does this work or volunteer experience benefit you?	

*STUDENT:

ONCE YOU COMPLETE PAGES 1-3, GIVE THIS 6-PAGE PACKAGE TO YOUR SUPERVISOR. THEY WILL RETURN IT TO YOU SO YOU CAN SUBMIT IT AS PART OF YOUR COURSE &/OR GRAD REQUIREMENTS.



EMPLOYER / SUPERVISOR EVALUATION OF EMPLOYABILITY SKILLS

STUDENT'S NAME:
NUMBER OF COMPLETED HOURS:
DATE(S)/MONTH HOURS COMPLETED:
NAME OF COMPANY/ ORGANIZATION:
ADDRESS:
SPECIFIC JOB OR DUTY PERFORMED:
SUPERVISOR'S NAME:
EMAIL:
CONTACT PHONE NUMBER
SIGNATURE: DATE:



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44 Postining to D. C. C. T. C.						
11. Participate in Projects & Tasks	4	•	•		NI/A	
a) Use of appropriate tools & tech.	4	3	2	1		
b) Operation of equipment	4 4	3 3	2 2	1 1		
c) Treat equipment with care	4	3	2	ı	IN/A	

STUDENT NAME:
GRADE:
EMPLOYER / SUPERVISOR'S ADDITIONAL COMMENTS:
(Please include strengths and areas for improvement)
SUPERVISOR SIGNATURE:
DATE:
*SUPERVISOR: PLEASE COMPLETE THE LAST 3 PAGES OF THIS 6-PAGE PACKAGE, THEN RETURN IT TO THE STUDENT. THEY WILL SUBMIT IT AS PART OF THEIR
COURSE &/OR GRADUATION REQUIREMENTS