

# Training period Handbook

IES El Palo

Student: \_\_\_\_\_

VET qualification: Expert in Personal Aesthetics

Year: 201\_\_/201\_\_

JUNTA DE ANDALUCÍA  
CONSEJERÍA DE EDUCACIÓN, CULTURA Y DEPORTE



Erasmus+



**JUNTA DE ANDALUCIA**  
 CONSEJERÍA DE EDUCACIÓN, CULTURA Y DEPORTE

**FORMACIÓN EN CENTROS DE TRABAJO FCT-UE. DATOS DE LA EMPRESA WORK PLACEMENT INFORMATION**

<b>CENTRO DOCENTE:</b> I.E.S EL PALO  <b>PROFESOR/PROFESORA REPOSABLE DEL SEGUIMIENTO:</b>  <b>ALUMNO/ALUMNA:</b>		<b>CENTRO DE TRABAJO COLABORADOR: TUTOR / TUTORA DEL CENTRO DE TRABAJO:</b>  <b>PERÍODO DE REALIZACIÓN DE LA FCT</b> <b>PRIMER TRIMESTRE</b> <b>SEGUNDO TRIMESTRE</b> <b>TERCER TRIMESTRE</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>CURSO ESCOLAR:</b> 201__/201__ <b>FAMILIA PROFESIONAL:</b>		<b>CICLO FORMATIVO:</b>		<b>GRADO:</b>
<b>RESULTADOS DE APRENDIZAJE</b>		<b>ACTIVIDADES FORMATIVO - PRODUCTIVAS</b>		<b>CRITERIOS DE EVALUACIÓN</b>

At \_\_\_\_\_, \_\_\_\_\_, 201\_\_

THE STUDENT

VEBº THE TEACHER IN CHARGE OF ASSUSSMENT

VEBº COMPANY SUPERVISOR

Fdo:

Fdo:

Fdo:



**FORMACIÓN EN CENTROS DE TRABAJO FCT-UE. FICHA SEMANAL DEL ALUMNO/A. WORK PLACEMENT TRAINING. WEEKLY TASKS SHEET**

STUDENT  
(Sheet ..... of .....)

Week from ..... to..... (month) ....., 201__			
VET SCHOOL CENTER Teacher's name:		Collaborating company:	
STUDENT'S NAME:		VET OFFICIAL PROFESSIONAL DEGREE:	LEVEL:
DAY	TASK PERFORMED /JOB TRAINING	TIME USED	COMMENTS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			

THE STUDENT

VºBº THE TEACHER IN CHARGE OF ASSUSSMENT

VºBº COMPANY SUPERVISOR

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**COMPANY SUPERVISOR ASSESSMENT REPORT**

Name of Student:																																																	
VET School:																																																	
VET Technician or High Technician in:			Degree: High / Middle																																														
Name of Training Company:			Training hours accomplished:																																														
Company supervisor within the training period:																																																	
Name of teacher in charge of follow-up:																																																	
Company manager:																																																	
Company webpage:																																																	
1.- TASKS DEVELOPED IN THE INTERSHIP RELATED TO THE WORKPLACEMENT TRAINING:																																																	
2.- STUDENT WORKPLACEMENT ASSESSMENT REGARDING THE FOLLOWING ASPECTS: (Mark with an X):																																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">ASPECTS TO BE CONSIDERED</th> <th style="width:10%;">FAILED</th> <th style="width:10%;">PASSED</th> <th style="width:10%;">EXCELENT</th> <th style="width:35%;">COMMENTS</th> </tr> </thead> <tbody> <tr> <td>Professional Skills</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Organization and planning of the work</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Punctuality and discipline</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Teamwork Skills</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Professional Autonomy and Initiative</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Solving-problem Skills</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Flexibility and adaptability</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other aspects to be mentioned</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					ASPECTS TO BE CONSIDERED	FAILED	PASSED	EXCELENT	COMMENTS	Professional Skills					Organization and planning of the work					Punctuality and discipline					Teamwork Skills					Professional Autonomy and Initiative					Solving-problem Skills					Flexibility and adaptability					Other aspects to be mentioned				
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3.- POSSIBLE ADJUSTMENTS OR AMENDMENTS TO ORIGINAL WORKING PROGRAMME:																																																	

(Place) \_\_\_\_\_ (month) \_\_\_\_\_ (day) \_\_\_\_ de 2.01\_\_

THE COMPANY SUPERVISOR

Signature: \_\_\_\_\_