

Multinational Trainee Mid-Term Evaluation

To be completed by Host Supervisor



Government regulations require the evaluation of the exchange programs authorized by IPS. Please complete this evaluation with your trainee, and send a copy to IPS.

The Trainee

1a. Were the trainee's skills, education and experience accurately described in their application to your training program? ☐ Yes ☐ No

Please comment:

1b. Are the trainee's skills, education and experience well-suited to the training program you designed?

☐ Yes ☐ No

Please comment:

2. Please comment on the trainee's participation in the program:

3. Please comment on the trainee's relationship with supervisors and peers:

4. How would you rate the trainee's progress so far?

5. What are your goals for the trainee for the remainder of the program?

Over, please...

The Training Program

1. Are you satisfied with the training you have provided so far? ☐ Yes ☐ No

Please comment:

2. What modifications to the training plan are needed, if any, to ensure a successful completion of the training objectives?

3. Please comment on the balance between the formal training and “on-the-job” training of the program.

Signature of Trainee

Signature of Supervisor

Date

Date

Please return to:

YMCA - IPS
5 West 63rd Street
New York, NY 10023

Call Toll Free
1-888-477-9622
E-mail
ips@ymcanyc.org

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