

## Engineering Practice Certificate – College of Science and Engineering

**Student:** Name: \_\_\_\_\_  
Student Number: \_\_\_\_\_  
Engineering Major: \_\_\_\_\_

**Employer Details:** Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_

**Employment Details:** Job description: \_\_\_\_\_  
Starting Date: \_\_\_\_\_  
Completion Date: \_\_\_\_\_

**REQUIRED - Total number of days worked:** \_\_\_\_\_  
**REQUIRED - 8 hour day            10 hour day            12 hour day**

**Supervisor Details:** Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Supervisor's Report:**  
I have read and approved the student's Engineering Practice report:      Yes            No

*The student's technical competence has been*

Outstanding	Good	Satisfactory	Less than satisfactory	Unacceptable

*The student's team and interpersonal skills has been*

Outstanding	Good	Satisfactory	Less than satisfactory	Unacceptable

*The student's diligence and dependability has been*

Outstanding	Good	Satisfactory	Less than satisfactory	Unacceptable

Comments:

\_\_\_\_\_

Supervisors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Upon completion please return to student for submission to the College Office or  
email to [cse.academicsservices@jcu.edu.au](mailto:cse.academicsservices@jcu.edu.au)**

TO BE COMPLETED BY COLLEGE OFFICE		
Date Received	Name	Processed