**INSTITUTIONAL NUTRITION SYSTEMS FIELD TRAINING STUDENT EVALUATION FORM**

**STUDENT’S NAME SURNAME: INSTITUTION’S TITLE:**

**COURSE NAME: INSTRUCTOR:**

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|  | **EVALUATION CRITERIA** | **SCORE** |  |  | **SCORE** |
| 1 | Technical contract |  | 11 | In-service training |  |
| 2 | Preparing and applying documents such as food table, store stock cards,etc. |  | 12 | Studies to improve quality and taste |  |
| 3 | Cost calculation |  | 13 | Literature review of the field |  |
| 4 | Food purchase / storage |  | 14 | Diet cards, ration etc. follow |  |
| 5 | Menu planning |  | 15 | Preparing sample texts on newspaper, magazine and web etc. in a determined subject related to the field |  |
| 6 | Standard tariff development |  | 16 | Conducting duties and responsibilities |  |
| 7 | Food service and distribution |  | 17 | Adherence to the rules of the institution, dress code |  |
| 8 | Waste control |  | 18 | Harmonization with working hours |  |
| 9 | Kitchen hygiene  |  | 19 | Attendance / absenteeism |  |
| 10 | Sampling |  | 20 | Team work and communication with other staff |  |
| **TOTAL SCORE** |  |

\*Each criteria will be evaluated over 5 points.

\*\*In case you think there are other skills which student should have or improve besides above mentioned skills, please specify:

**This form has been filled out by:**

**Name and Surname:**

**Title:**

**Date / Signature / Seal:**

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