

EXAMPLE EMPLOYER / PLACEMENT SURVEY

Introduction

1. As part of our process of continuous improvement, the [Program Name] program at the University of Guelph, is gathering feedback regarding your experiences with placement students from the [Program Name] program.

We value your honest and detailed responses.

This questionnaire should take approximately 5 minutes to complete. **Your responses will be completely anonymous to the Program Heads, Instructors, and the improvement committee.**

Note: Depending on the administration of the survey, anonymity may not be possible. In this case an alternate statement describing how identifying information will be removed before the data is shared may be more appropriate. Be aware of your audience and the ways in which power differentials may affect responses.

Please select your response by clicking on the appropriate choice.
Open boxes are available for some questions for you to enter your own descriptive answer.

Demographics

2. Please indicate the type of organization that you work for:

Type 1

Type 2

Type 3

Type 4

Type 5

Other _____

3. When was your **most recent** experience supervising students from the [Program Name] program?

- I am currently supervising a placement student
- I supervised a placement student in 2021
- I supervised a placement student in 2020
- I supervised a placement student in 2019
- I supervised a placement student prior to 2019

4. In what year of their program are **most** of the [Program Name] students that you have supervised?

- 1st year
- 2nd year
- 3rd year
- 4th year
- about equal numbers from multiple years

Student abilities prior to placement

5. When [Program Name] students begin their placement, what skills or knowledge are the most well developed?

6. When [Program Name] students begin their placement, what skills or knowledge do you feel they should have, but need improvement?

Achievement of Program Learning Outcomes

7. Based on your overall experience with [Program Name] students, how would you rate their ability to do the following:

	Not at all	Very little	Somewhat	Moderately	Greatly	Not applicable, or unsure
Program Learning Outcome 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Learning Outcome 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Learning Outcome 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Learning Outcome 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Learning Outcome 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Note: Restrict the program learning outcomes here to only those that are applicable to the placement. In cases where the outcome includes disciplinary or educational specific terminology, the wording of the outcome may need to be altered to improve clarity.

Comparison across institutions

8. Q11 Do you supervise students from other universities / colleges?

Yes

No

Display this question if students from other universities / colleges are supervised

9. What strengths (e.g. skills/ knowledge/ attitudes/ values) make [Program Name] students unique compared to students from other institutions?

10. Please provide any further comments about the [Program Name] program that you feel may benefit this improvement process:

Thank You

11. Thank you for taking the time to complete this survey. We value your contribution to the improvement of the [Program Name] Program.

If you have any further questions regarding this survey, please contact:

[Program Chair]
Department Chair and Professor

Department of [Program Name]
[Email]@uoguelph.ca