

**JOB SHADOW EMPLOYER EVALUATION
LINDSAY HIGH SCHOOL**

Thank you for hosting a student at your workplace. We would like to provide the most positive experience possible for both employers and our students. Therefore, please take a few moments to share your assessment of the experience. Your input of the job-shadowing experience and the student who shadowed you will be very valuable as we seek to improve the senior project job-shadowing activity.

Name Marisol Huerta Phone (559) 759-9230
 Company/Organization Medical Assistance / Manager
 Address 110 N D Street Porterville CA 93257
 Student Name Lupette Castaneda Date of Shadow 8/31/14

Please rate the student, using the following scale, by circling the appropriate number:
 4 – exceeds expectations; 3 – meets expectations; 2 – below expectations, 1 – unacceptable

Student Readiness

_____ Arrived on time	<u>(4)</u>	3	2	1
_____ Displayed Enthusiasm and interest	<u>(4)</u>	3	2	1
_____ Appeared clean and well-groomed	<u>(4)</u>	3	2	1
_____ Wore appropriate clothing	<u>(4)</u>	3	2	1
_____ Showed appropriate behavior at work site	<u>(4)</u>	3	2	1
_____ Asked appropriate questions	<u>(4)</u>	3	2	1
_____ Demonstrated good listening skills	<u>(4)</u>	3	2	1

Business Ratings

_____ You were satisfied overall with experience	<u>(4)</u>	3	2	1
_____ Your objective was achieved	<u>(4)</u>	3	2	1
_____ You would recommend student for a similar experience	<u>(4)</u>	3	2	1
_____ You were satisfied with student knowledge about the business or organization	<u>(4)</u>	3	2	1

Would you be able to host another Lindsay High School student? YES
 Are you able and willing to host a bilingual student? Yes

Do you have any suggestions for improving the job-shadow experience for students?
NO

Mr. Huerta Employer Signature
J. Castaneda Student Signature

Date: 8/31/14
 Date: 8/31/14

Student Name: Lyzette Custaneda

JOB SHADOW: INTERVIEW WORKSHEET

This form must be completed during and after the job shadow. Your final version, complete with responses from your employer must be typed, saved, and uploaded to your senior website.

Directions: This form is to be completed by students prior to their release to shadow and interview someone in the community for their senior project.

Person to be interviewed: Marisol Hurtado Phone (559) 759-9230

Job Title Medical Assistant/manager

Business Orthopedic Surgeon office

Place of interview (specific city/street address) _____

Date and time of the interview 8/31/14 5:15 pm

Estimated length of interview 45 min.

Briefly state the nature and purpose of this experience and list the objective you hope to accomplish during the job shadow and interview

Question 1: What training/education is required?

Response: Quotes, some CPT & ICD 10 quotes

Question 2: How much flexibility do you have in terms of hours, vacation?

Response: Hardly get vacation time.

Question 3: Do you work a lot overtime?

Response: NO

Question 4: What inspired you to chose your career?

Response: Small career, Used to be good pay

Question 5: How has your career affected your life?

Response: Less time with family & in general

Question 6: What are some skills needed in your line of work?

Response: Flexible, deal with wounds, multi-tasked

Question 7: Do you take work home?

Response: NO

Question 8: How did you get started in this field?

Response: Interviewed, got job right away.

Question 9: What is the most challenging part of your job?

Response: Trying to deal with ICD 10.