**Student Internship Programme**

**Evaluation on the Student Internship Programme**

To enable us to better execute the Student Internship Programme (“SIP”), your feedback is much appreciated. This evaluation should be completed by a member of the Participating Employer (“PE”) who had considerable direct involvement in the SIP process.

Please rate (🗹) the SIP using the scale below. Rate N/A for not applicable or not enough information to form a judgement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| **Very Dissatisfied** | **Somewhat Dissatisfied** | **Neutral** | **Somewhat Satisfied** | **Very Satisfied** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Student Internship Programme Calendar** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Are you satisfied with the timing and/or duration of the following activities?** | | | | | | |
| 1. Submission of Employer Application and Internship Positions |  |  |  |  |  |  |
| 1. Receipt of Student Applications |  |  |  |  |  |  |
| 1. Timing of the Recruitment/Selection Process   (Employers to determine their schedules in light of own business considerations after receipt of student applications) |  |  |  |  |  |  |
| 1. Internship Placement   (at least 1 month, reimbursable up to 3 months) |  |  |  |  |  |  |
| Additional Comments  (*e.g. Any major difficulties/constraints encountered in execution? Any improvement suggestions?*) | | | | | | |

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| **Support for Participating Employers** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Are you satisfied with the support rendered by the implementation team?** | | | | | | |
| 1. Clear communication on SIP features |  |  |  |  |  |  |
| 1. Promptness in responding to enquiries |  |  |  |  |  |  |
| 1. Quality of advice given |  |  |  |  |  |  |
| 1. Timeliness in resolving issues |  |  |  |  |  |  |
| 1. Professionalism in accommodating reasonable requests |  |  |  |  |  |  |
| Additional Comments | | | | | | |

**Evaluation on the Student Internship Programme** (cont’d)

Please rate (🗹) the SIP using the scale below. Rate N/A for not applicable or not enough information to form a judgement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| **Very Dissatisfied** | **Somewhat Dissatisfied** | **Neutral** | **Somewhat Satisfied** | **Very Satisfied** |

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| --- | --- | --- | --- | --- | --- | --- |
| **Process Management** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Are you satisfied with the following workflow/activities?** | | | | | | |
| 1. Administrative formalities regarding the application or renewal / eligibility vetting process |  |  |  |  |  |  |
| 1. Support on managing the company profile and job information posted on online application portal |  |  |  |  |  |  |
| 1. Discretion exercised by employers on how to pace the recruitment/selection schedule |  |  |  |  |  |  |
| 1. Follow-up on the recruitment process by HKSI Institute |  |  |  |  |  |  |
| 1. Liaison support rendered in arranging non-overlapping internship periods of the student for more than one position (if applicable) |  |  |  |  |  |  |
| 1. Employer briefing(s) prior to internship commencement |  |  |  |  |  |  |
| 1. Arrangements of random pulse checks/ random workplace visits on interns |  |  |  |  |  |  |
| 1. Maintain regular communication with employers regarding status monitoring on interns during their placement |  |  |  |  |  |  |
| 1. Action taken to handle complaints on students (if applicable) |  |  |  |  |  |  |
| Additional Comments  (*e.g. Any major difficulties/constraints encountered in execution? Any improvement suggestions?*) | | | | | | |

**Evaluation on the Student Internship Programme** (cont’d)

Please rate (🗹) the SIP using the scale below. Rate N/A for not applicable or not enough information to form a judgement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| **Very Dissatisfied** | **Somewhat Dissatisfied** | **Neutral** | **Somewhat Satisfied** | **Very Satisfied** |

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| --- | --- | --- | --- | --- | --- | --- |
| **Usefulness** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Are you satisfied with the SIP in** | | | | | | |
| 1. meeting your expectations? |  |  |  |  |  |  |
| 1. the number of applications received from students? |  |  |  |  |  |  |
| 1. the quality of applicants? |  |  |  |  |  |  |
| 1. recruiting the right student(s) for your internship position(s)? |  |  |  |  |  |  |
| 1. identifying talent pipeline for your company? |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Overall Performance (Please rate)** |  |  |  |  |  |  |
| Additional Comments | | | | | | |

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| --- |
| 1. **Will your company consider participating in the SIP in the future (if any)?** |
| |  |  | | --- | --- | | Yes[[1]](#footnote-1) | No | |

**Evaluation on the Student Internship Programme** (cont’d)

The SIP Application Portal (“Portal”) was enhanced with new features in January 2025. Please rate (🗹) the PE Admin Panel using the scale below. Rate N/A for not applicable or not enough information to form a judgement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| **Very Dissatisfied** | **Somewhat Dissatisfied** | **Neutral** | **Somewhat Satisfied** | **Very Satisfied** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **User System Experience** | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **To what extent do you think the Portal facilitates your participation in the SIP in the following aspects?** | | | | | | |
| 1. Submission of New Employer Application or Renewal Application |  |  |  |  |  |  |
| 1. Internship Position Management, including job additions, job posting, amendments on job details, etc |  |  |  |  |  |  |
| 1. Receipt and Screening of Student Applications |  |  |  |  |  |  |
| 1. Report Internship Offer(s) and Display Quota Usage |  |  |  |  |  |  |
| 1. Facilitate Upload and Review of Verification Documents |  |  |  |  |  |  |
| Additional Comments  (*e.g. Any major difficulties/constraints encountered in usage? Any improvement suggestions?*) | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **N/A** |
| 1. **Overall Satisfactory Level on the Portal** |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Evaluator’s Information | |  | | | | |
| Name |  |  | Position Title |  | | |
|  | |  |  | |  |  |
|  |  |  |  | |  |  |
|  | Original signature of Evaluator |  | Company Chop | |  | Date |

Thank you for completing this evaluation.

1. This is only indicative for the HKSI Institute’s planning purpose. [↑](#footnote-ref-1)