



INTERNATIONAL PROGRAMS

COLORADO STATE UNIVERSITY

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J-1 STUDENT ACADEMIC TRAINING EVALUATION FORM

Student's Name: _____

CSU ID Number: _____

Email Address: _____

Phone Number: _____

Name of Employer/Company: _____

Describe the tasks you completed during your Academic Training (AT) experience:

The U.S. Department of State has advised that students participating in AT must be involved in primarily substantive roles ((e.g., *shadowing managers, participating in project design, management, or event planning*) that involve no more than infrequent non-substantive tasks (e.g., *housekeeping, bussing tables, serving food*).

What percentage of your time during AT was spent doing substantive tasks? _____

What percentage of your time during AT was spent doing non-substantive tasks? _____

How have you achieved the goals and objectives for which this AT was authorized?

What aspects of your AT were most useful to you?

Please list any cross-cultural activities you participated in during your AT that helped to enhance your exchange visit in the United States: _____

Other comments about your academic training experience: _____

I hereby certify that the information above is accurate.

Student's Signature: _____

Date: _____