

**Appendix 11**

**WORK PLACEMENT DE-BRIEFING**

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| **Student Name:** |  | **Placement Provider:** |  |
| **Placement dates:** |  | **Supervisor:** |  |

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| 1. Were the tasks you undertook or shadowed during the placement those indicated in the original placement description? If not, what tasks were you given the opportunity to carry out and/or observe? |
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| 1. Did the placement enable you to achieve your specific objectives? |
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| 1. Do you feel you received sufficient information, instruction and training as part of the placement? |
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| 1. Which aspects of the placement did you find most useful? |
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| 1. What, if anything, would you change about the placement? |
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| 1. Did you have any concerns relating to your health, safety or wellbeing during the placement? |
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| 1. Do you have any other comments or suggestions? |
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| 1. Would you recommend this placement to other students? Why? |
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