



KENYA WATER INSTITUTE

P.O. Box 60013-0200, Nairobi-Kenya

P.O. Box 60013-00200

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STUDENT’S ASSESSMENT FORM

It is appreciated that opportunities for displaying the qualities mentioned will vary with the type of training given, It is intended therefore that the rating scale should show the assessment of the extent to which the student had met the demands imposed on him/her by those opportunities as may be related to other trainees of a similar type and level.

NB: To be filled by supervisor in confidence and sent to:

**The Director,
Kenya Water Institute
P.O BOX 60013 -00200
Nairobi**

Name of the student

KEWI Registration No

Name of the Supervisor

Designation

Company / Organization

Date

1. Basic Personal Information

Criteria	Unsatisfactory 1pt	Below Average 2pts	Average 3pts	Good 4pts	Very Good 5pts
Appearance (courtesy, dressing)					
Personality and Confidence					
Communication (ability to express oneself)					
Punctuality					
Relation to others (students, company staff etc)					

2. Competency

Criteria	Unsatisfactory 1pt	Below Average 2pts	Average 3pts	Good 4pts	Very Good 5pts
Willingness to learn					
Carrying out duties accordingly					
Ability to produce quality results					
Taking initiative in training					
Team work					
Adaptability					
Reliability					

3. Use of tools/ machinery

Criteria	Unsatisfactory 1pt	Below Average 2pts	Average 3pts	Good 4pts	Very Good 5pts
Trainee is able to use tools without much assistance once taught.					
Trainee showed innovativeness in the use of tools.					
The trainee is confident when handling tools/machinery once taught.					

4. Technical competencies (CWE Attachment I)

	Not able	Able	Not available
1.0 Abstraction			
1.1 Cleaning of the screens,			
1.2 Observing O & M schedules on the intake works.			
2.0 Water Treatment:			
2.1 Determining of the flow rate (Q),			
Conducting jar test and other routine test,			
2.2 Preparing the desired solutions and dosing,			
2.3 Estimating the amount of chemicals required per day/month,			
2.4 Monitoring functionality and safety of filters,			
2.5 backwashing and			
2.6 Scouring of sedimentation tank.			
3.0 Distribution:			
3.1 Operating of different valves within the distribution system,			
3.2 mapping the layout of the distribution system,			
3.3 installation of service connectors			
4.0 waste water collection:			
4.1 laying and jointing of sewers,			
4.2 sewer cleaning and unblocking			
4.3 sewer inspection,			
4.4 construction sewer appurtenances,			
4.5 repair sewers,			
5.0 wastewater treatment:			
5.1 operate and maintain waste water treatment system units (screens, grit chamber, sedimentation tanks, trickling filters, stabilization ponds),			
6.0 Electrical Mechanical/ Equipments:			
6.1 Carrying out pump start-ups monitoring and shut-down,			
6.2 Select and install electrical mechanical equipments,			
6.2 Conducting fault/ diagnosing / trouble shooting,			
6.4 conduct Routine servicing of the pumps,			
6.5 Observing safety measures,			
6.7 Analyzing operational record sheets.			
7.0 Metering & instrumentation:			
7.1 Install water meters correctly,			
7.2 Undertake meter reading and interpret the readings,			
7.3 Undertake service connection survey,			
8.0 Pipe work:			
8.0 Pipeline laying and jointing,			
8.2 Pipe repairs, installation of valves.			
9.0 Non Revenue Water:			
9.1 Use of Non revenue water reduction equipments,			
10.0 Construction:			
10.1 Applying the standards in construction of water & wastewater structures,			
10.2 choosing the right materials for construction in building works			

5. Overall assessment

Rating Scale	Pass 1pt	Average 2pts	Good 3pts	Very Good 4pts	Excellent 5pts
Tick appropriate box					

Do you think the attachment training was relevant to the student course he/she is undertaking?
Please comment

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Any identified strength / potential of the student?

Please comment.....

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Any identified weakness of the student?

Please comment

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Would you recommend the student/ other students to be attached in your organization under you?

YES

NO

Any other general comment

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TRAINER'S NAME _____ Tel. No. _____

DATE _____ SIGNATURE _____

OFFICIAL RUBBER STAMP _____

