

MSc in Applied Mathematics - Traineeship Assessment

(Please return it to the external training office)

Student Name:
Student number:

Traineeship 191508209
MSc specialization:

Assessment criteria (and suggested aspects)	[Weightage]	--	-	+/-	+	++	Remark (optional)
The Report							
Written Communication <i>[Middle]</i> <ul style="list-style-type: none"> • Problem statement • Context and existing work • Discussion and argumentation • Results and conclusions • Organization and structure • Clarity/Language 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Scientific Quality <i>[Middle]</i> <ul style="list-style-type: none"> • Research question • Research method • Results • Contribution and originality 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reflection <i>[Low]</i> On societal/scientific relevance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Process (External Input) <i>[High]</i> <ul style="list-style-type: none"> • Independence and initiative • Creativity • Acquiring (new) technical skills • Work attitude • Planning and organization of work • Interaction and communication skills 		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Formalities completed (*) (To be filled in by external training office)		FINAL MARK:					

Motivation for final mark (obligatory and related to above assessment):

Date:

Name of Examiner 1:

Name of Examiner 2:

Signature:

Signature:

(*) Mark not valid without this box filled in

Fields obligatory to fill in.