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**PROGRAM GRADUATE**

**EMPLOYER SURVEY CONTACT INFORMATION**

Two weeks prior to the on-site visit provide a list of six individuals who have completed the program within the last three years and are employed locally at different repair facilities. The ETL will select a minimum of three employers to survey during the evaluation. The program instructor or administrator must contact the employers prior to the on-site visit informing the employer a representative from the ASE Education Foundation will be in contact with them regarding the graduate.

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| 1. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
|  |  |  |
|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
|  |  |  |
|       |       |    |       |
| Street | City | State | Zip |

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| 2. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
|  |  |  |
|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
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|       |       |    |       |
| Street | City | State | Zip |

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| 3. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
|  |  |  |
|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
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|       |       |    |       |
| Street | City | State | Zip |

**PROGRAM GRADUATE**

**EMPLOYER SURVEY CONTACT INFORMATION**

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| 4. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
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|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
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|       |       |    |       |
| Street | City | State | Zip |

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| 5. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
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|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
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|       |       |    |       |
| Street | City | State | Zip |

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| 6. |       |       |       |
|  Graduate First Name | Graduate Last Name | Graduation Year |
|  |  |  |
|       |       |       |
| Employer | Supervisor Name | Supervisor Phone # |
|  |  |  |
|       |       |    |       |
| Street | City | State | Zip |