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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.

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

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

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

**PROGRAM GRADUATE**

**EMPLOYER SURVEY CONTACT INFORMATION**

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

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

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