|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  | **14-CPV-FO-04-E** | | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | | **Encuesta de Satisfacción de Servicio Social y/o Prácticas Profesionales para Empresas/Instituciones** | | | | | | | | |  |  |  |  |  |  |  |  | | **Instrucciones:** La encuesta debe ser llenada por un representante de la empresa/institución, una vez que el alumno concluya su servicio social, práctica profesional o proyecto especial, según sea el caso. Llenar un formato por cada alumno y responder cada pregunta con un solo valor. Favor de utilizar letra de molde legible o máquina. | | | | | | | | |  |  |  |  |  |  |  |  | | **Fecha de aplicación de encuesta (dd/mm/aaaa):** | | | |  | | | | | Categoría  (Marque con una X) | | Servicio Social |  | Prácticas Profesionales |  | Proyecto Especial |  | | Fecha de inicio | | Día: |  | Mes: |  | Año: |  | | Fecha de término | | Día: |  | Mes: |  | Año: |  | | Horas cubiertas | |  | | | | | | |  |  | | | | | | | | **I. DATOS DE LA EMPRESA/INSTITUCIÓN RECEPTORA** | | | | | | | | | Nombre de la Empresa o Institución | |  | | | | | | | Nombre del responsable | |  | | | | | | | Cargo | |  | | | | | | |  | | | | | | | | | **II. DATOS DEL ALUMNO** | | | | | | | | | Nombre | |  | | | | | | | Plantel del CONALEP | |  | | | | | | | Carrera | |  | | | | | | |  | | | | | | | | | **III. ENCUESTA** (Contestar con una X, un solo valor por cada pregunta) | | | | | | | | | ***1. ASISTENCIA*** | | | | | | | | | Indique como fue la asistencia del alumno de acuerdo al tiempo que se estableció para su estadía en su empresa/institución. | | | | | | | | |  | Mala | Regular | Aceptable | Buena | Excelente |  |  | |  | 1 | 2 | 3 | 4 | 5 |  |  | | ***2.CONOCIMIENTOS*** | | | | | | | | | De acuerdo al desempeño del alumno en su empresa/institución, indique el nivel de conocimientos en su área de estudio. | | | | | | | | |  | Malo | Regular | Aceptable | Bueno | Excelente |  |  | |  | 1 | 2 | 3 | 4 | 5 |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | | ***3. INICIATIVA*** | | | | | | | | | Indique como considera que fue la iniciativa del alumno para resolver problemas relacionados con su área de estudio. | | | | | | | | |  | Mala | Regular | Aceptable | Buena | Excelente |  |  | |  | 1 | 2 | 3 | 4 | 5 |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | | ***4 DISPONIBILIDAD*** | | | | | | | | | Indique como fue la disponibilidad del alumno para realizar actividades vinculadas con su área de estudio. | | | | | | | | |  | Mala | Regular | Aceptable | Buena | Excelente |  |  | |  | 1 | 2 | 3 | 4 | 5 |  |  | |  |  |  |  |  |  |  |  | | ***5.SATISFACCIÓN*** | | | | | | | | | ¿Qué tan satisfechos se quedó con el desempeño del alumno en su empresa/institución? | | | | | | | | |  | Mala | Regular | Aceptable | Buena | Excelente |  |  | |  | 1 | 2 | 3 | 4 | 5 |  |  | |  |  |  |  |  |  |  |  | | **Comentarios o sugerencias\*** | | | | | | | | |  | | | | | | | | | \*Opcional |  | Sello de la empresa |  |  |  | |  | |  |  |  |  | **Firma del responsable** | | |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |