



**CENTRAL INDUSTRIAL LIAISON
AND PLACEMENT UNIT**

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....., 201

Dear Sir/Madam,

STUDENTS' INDUSTRIAL WORK- EXPERIENCE SCHEME {SIWES}

SIWES YEAR.....

The bearer Mr./Miss/Mrs.....is a year
.....student in the Department of

He/She has expressed willingness to have his/her Industrial Training beginning from
May, to October, in your company.

We are confident that your company can provide him/her the required exposure.

It will be appreciated if you could let us know if you are prepared to take him/her for
the training.

We trust that we can always count on your support now and in the future in ensuring that SIWES
continues to play its role in the formation of technical manpower for the economy.

Please complete the attached form and send it back through the bearer.

Thank you.

Prof. J. S. AJIBOYE,
Ag. HEAD, CENTRAL INDUSTRIAL
LIAISON & PLACEMENT UNIT.

**CENTRAL INDUSTRIAL LIAISON & PLACEMENT UNIT
UNIVERSITY OF LAGOS**

STUDENTS' INDUSTRIAL WORK- EXPERIENCE SCHEME (SIWES)

OFFER OF PLACE OF INDUSTRIAL ATTACHMENT SIWES YEAR.....

(TO BE COMPLETED BY THE EMPLOYER)

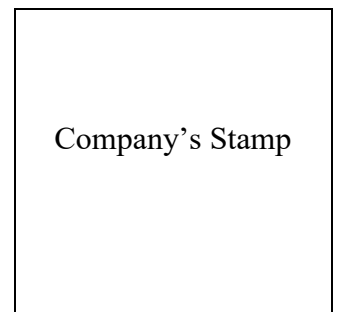
1. Name of Student:.....Matric No.....
2. Course Year of Study.....
3. Course of Study/Discipline
4. Nature of Work-Experience Available:
(Please give a brief description)
5. Proposed Training Programme
(Please use additional sheets as necessary)
6. Full name of Training Officer.....

Signature.....Date:.....

Company's Full Address

.....
.....
.....
.....

Telephone Number(s)





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Mr./Mrs./Miss _____

Department of _____

Dear Mr./Mrs./Miss, _____

STUDENTS' INDUSTRIAL WORK-EXPERIENCE SCHEME

I am pleased that you are being placed for industrial training with _____

_____. I hope that you will enjoy your work there
and find it useful. Will you please report to _____
at _____ a.m. on _____.

May I emphasize that, to a large extent, the benefit you gain from this period of training will depend on your attitude towards it. If you try to find out why a particular process is done one way instead of another way which appears better to you, you will learn much more than if you stand around without questioning anything. Not all the problems of industry are capable of unique solutions and so you should try to find the pros and cons of the various possible answers in order to judge whether the solution adopted was the best.

Do not despise manual work. You cannot hope to lead other men effectively, as I hope you will one day, unless you know some of the problems they have in doing their work. You do not necessarily have to be skilled in all the crafts you will eventually control. However, you do have to know enough about the various crafts to use them to best advantage in building the overall project for which you are responsible.

Go in suitable clothing. You cannot hope to learn about a process unless you take part, and you cannot take part if you are afraid of getting your clothes dirty.

During your period of training you will attend at the normal hours of work specified by your employer and will be subject to his normal discipline. This is an important part of the training. There had been several complaints of poor time-keeping by students participating in SIWES from employers in the past; I hope you will ensure that you are not a cause for complaint.

Industrial Training is a compulsory part of the degree course and you must pass in Industrial Training in order to qualify for your degree award. The following procedure must therefore be followed:

- (1) You should purchase a standard student's log-book in which you will record at weekly intervals or shorter periods if you wish but not longer, details of the work you are doing under the headings:
 - Name of Department where you worked and dates.
 - Details of work allocated to you.
 - Details of work actually done by you including drawings where necessary.
 - Function of Department in which you are working.
 - Relationship of Department in which you are working to the rest of the factory or organization.
 - Conclusion with any comments on how you might improve the processes.
- (2) The log-book must be signed by the head of each section or department in which you work.
- (3) At the end of training you must prepare a summary report of not more than 10 pages on A4 paper giving the name of the firm; the dates of employment; a description of the work done by the organization as a whole and the particular departments for which you worked; an outline of the training programme you followed; an account of the work you actually did and conclusions on the training programme and the industrial process.
- (4) Before you leave the organization ask the training officer at the firm to sign your logbook, your final report, the Employer's Report Form B and ITF Form 8 and bring them back with you.
- (5) On return to the University, the log-book, the final report, the Employer's Report Form B and ITF Form 8 should be submitted to your Departmental SIWES Coordinator for assessment.

Many reports previously submitted have been copies from maintenance instructions or other books loaned by the employer. Whilst you may wish to copy such information into your log-book it does not tell us what we chiefly wish to know, namely work you actually did, the problems encountered and any problems you may have solved. **Hence your final report must not be a repetition of standard technical data books.**

You will be visited by members of the academic staff of the university at least once during your training. If you encounter any problems, these should be referred to the employer's training officer in the first instance.

Please complete the enclosed Assumption of Duty Form and return it to Central Industrial Liaison and Placement Unit within two days at your post, so as to ensure that the visiting academic staff can locate you. Also please complete the ITF SPE-1 Form and submit at the ITF Area Office nearest to your location. This is essential to enable ITF to pay your stipend.

Please pay particular attention to the code of conduct enunciated in the log-book and do your best to make a success of this scheme.

With best wishes,

Yours sincerely,

DR. J. S. AJIBOYE,
Ag. HEAD, CENTRAL INDUSTRIAL
LIAISON & PLACEMENT UNIT.



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Dear Sir / Madam,

STUDENTS' INDUSTRIAL WORK-EXPERIENCE SCHEME

This letter is to introduce Mr./Mrs./Miss who is reporting for training under the above scheme.

The Students' Industrial Work-Experience Scheme (SIWES) organized by the University of Lagos offers our students the opportunity of interacting with industrial environment while still undergoing their academic training. Owing to this exposure, the students come to appreciate the peculiarities of the environment in which they will eventually work and they are thus prepared to contribute almost immediately to the productivity of their employers after graduation.

Further, the University views participation in SIWES as essential to the training of competent science, engineering and technology graduates who are needed to bridge the technological gap between industrialized nations and Nigeria. Hence, successful participation in SIWES is a requirement for the award of degrees to students of these disciplines at the end of their courses of study.

The successful operation of the scheme requires the co-operation of employers as follows:

1. Completion and immediate Return of the Assumption of Duty Form to enable us know the **exact location** of the student in order to facilitate supervisory visits by academic members of staff of the University.
2. The log-book which the student keeps to record his operations should be signed by the supervisors of individual sections in which he worked.

3. The student's log-book and final report should be signed by the industry's Training Manager or Officer.
4. The Employer's Report, (SIWES Form B) and ITF Form 8 should be completed by the employer at the end of training to enable assessment of student's performance. This should be sent through the student in a sealed envelop.
5. The employer should nominate an Industrial Training Officer who will act as the contact with the University's SIWES Coordinator and also check the student's progress at regular intervals.
6. During training the students are expected to abide with your normal discipline, hours of work and time keeping regulations. They should undertake whatever work they are given, **although it is hoped that the training aspect will be borne in mind in selecting suitable tasks.**
7. If the student fails to avail himself of the opportunities provided or does not comply with time keeping and other regulations, he should first be given a warning, communicated also to the University's SIWES Coordinator. Thereafter if no appreciable change occurs in his behavior he should be dismissed and the University's SIWES Coordinator informed.

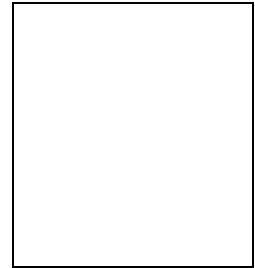
Your normal contact for any queries will be the University's Departmental SIWES Coordinator. However, if for any reason during the training period an emergency occurs and you are unable to contact the Departmental SIWES Coordinator, a message left in the Central Industrial Liaison and Placement Unit will be delivered to him.

We ask for your particular help in completing the documents requested in Sections, 2, 3 and 4 above as soon as the training is completed.

Once again we wish to thank you for your co-operation in taking students for training. We look forward to your continuing co-operation in ensuring the success of the scheme.

Yours faithfully,

DR. J. S. AJIBOYE,
Ag. HEAD, CENTRAL INDUSTRIAL
LIAISON & PLACEMENT UNIT.



**STUDENTS INDUSTRIAL WORK EXPERIENCE SCHEME
END-OF-PROGRAMME REPORT SHEET**

PART A (To be completed by the Student)

1. (a) Name in full:.....
 (b) Registration/Matriculation Number.....
 (c) Course of Study: (d) Year of Study.....
 (e) Name of Institution:.....
2. (a) Name & Address of the Establishment of Attachment:.....

 (b) The Department/Section:.....
 (c) Period of Attachment: From: To:
 Number of Weeks:
3. Total Allowance received by Student: ~~₦~~K
4. Brief outline of experience/relevance of training provided:.....

5. (a) Where were you attached last? (if applicable):,.....

Total number of weeks engaged on industrial attachment:

Signature of Student:..... Date:.....

PART B (To be completed by the Employer)

Do you agree with the student's comments in items 3 & 4 in Part A? YES/NO
If No, please comment:.....
.....

State total amount paid to student as ITF allowance ~~₦~~K
In words.....

6. Please assess the student's overall performance by ticking the appropriate box provided

VERY GOOD GOOD SATISFACTORY POOR

7. Will you accept the student in any future attachment? YES/NO

If No, please comment:.....
.....

8. Is your Company/Establishment in a position to offer this student a job in future?

9. Name of Reporting Officer:.....
 Designation/Rank:.....
 Signature/Stamp:..... Date:.....

N.B. Forms duly completed by employers should be forwarded to/collected by the respective institutions under seal:

PART C (To be completed by the Institution)

10. Indicate number of visits:
11. Give your assessment of facilities provided by Company during visit(s) by ticking:

STANDARD ADEQUATE RELEVANT NOT RELEVANT

12. Give your impression of the student's involvement in training: FULLY/PARTIALLY

13. Assessment of student's performance (Grading "A,B,C, or D" has to be stated).

Full Name of Supervisor..... Status:.....
 Department/Discipline:.....
 Signature/Stamp:..... Date:.....

N.B: This form is to be returned to the ITF on completion by the respective institutions under seal.



INDUSTRIAL TRAINING FUND

SIWES SUPERVISION ASSESSMENT FORM

To be Completed by Student

- 1) (a) Name in Full:.....
(b) Registration/Matriculation No.:.....
(c) Course of Study:.....
(d) Year of Study:.....
(e) Name of Institution:.....
- 2) (a) Name and Address of the Establishment of Attachment.....
..... (b)
Department/Section:..... (c)
Period of attachment: From:..... To:.....
- 3) (a) Is the place of Attachment Relevant to your course of study
 Yes No
(b) If Yes state reason:.....
(c) If No advise on possible alternative:.....
- 4) Total number of weeks spent so far:.....
- 5) (a) Have you been visited by your Institution- based Supervisor
 Yes No
(b) If Yes give Name of the Institution Based Supervisor:.....
.....

Signature of student:..... **Date:**.....

To be completed by the Industry Based Supervisor

6) (a) Please assess the student's overall Performance by ticking the appropriate box as provided.

Very Good Good Satisfactory Poor

(b) Are jobs assigned for the student relevant to his/her course of study?

(c) Name of reporting Officer:.....

Designation/Rank:.....

Signature/Stamp:.....Date:.....

7. Comment of ITF Supervisor:.....

8. Signature:.....Date:.....



UNIVERSITY OF LAGOS

SIWES ASSUMPTION OF DUTY FORM

Name of Student:.....
(Surname first and in Block Letters)

Year of Course & Department:.....

Name of Employer:.....

Address of Employer.....

*Actual Location of Student on Training
(Factory, Site, Office etc).....

*Name of Industry-Based Supervisor.....

*Designation of Industry-based Supervisor.....

.....
Signature of Company's
Training Officer

.....
Signature of Student

.....
COMPANY'S STAMP

.....
DATE

FOR OFFICIAL USE

Date form was received:.....

Action taken

N.B: This form must be completed and forwarded to the Central Liaison and Placement Unit (CILPU) by student concerned within ONE WEEK of his/her reporting for training.

*Correct information is required to facilitate supervisory visits by members of academic staff of the University.



UNIVERSITY OF LAGOS

CENTRAL INDUSTRIAL LIAISON AND PLACEMENT UNIT

ASSESSMENT OF INDUSTRIAL TRAINING
STUDENT EVALUATION BY EMPLOYER

201_ SIWES

This form is to be completed by the Industry’s Training Manager

GENERAL

1. Name of Student :.....
2. University/Department :.....
3. Year of Study:
4. Name of Company:
5. Company’s Major Products/Services.....
6. Period of Training:
7. Nature of Student’s Training :.....

8. Name of Industry’s Training Officer.....
9. **FINAL GRADING**

		Excellent	Very Good	Good	Fair	Poor
(i)	Familiarity with Company Operations					
(ii)	Comprehension of problem(s)					
(iii)	Method(s) of approach to Problem(s) and creativity or Originality of techniques					
(iv)	Sense of discipline on the job					

10. Description of facilities provided by the Company during training

.....
.....

11. Comment on overall performance.....

.....
.....

12. Give your impression of the student's involvement in training:

.....
.....

13. Further comments on success/failure of programme

.....
.....
.....

Signature..... Date:.....

14. Overall Grade: (Excellent, V. Good, Good, Fair, Poor)

.....
.....

Name:

Signature:.....

Date:.....





INDUSTRIAL TRAINING FUND

STUDENTS COMMENCEMENT OF ATTACHMENT FORM (SCAF)

Institution:.....

Name of Organisation:.....

Location Address:.....

ITF Area Office

Phone Number of Organization.....

E-mail of Organization:.....

S/No.	Name of Student	Matric No	Course of Study and Year/Level	Period of Attachment in Months	Date of Commencement	Date of Completion	Remarks

This form is to be completed by the Employer and sent to ITF Area Officeby hand

Date.....

Stamp and Signature of Employer.....

