



UNIVERSITÀ DEGLI STUDI DI PALERMO

STAKEHOLDERS SURVEY

Dear Mr/Ms.....,

we think that the competences and skills provided by the (1st – 2nd) cycle Degree Course might be useful for your Company/Organisation, and we kindly ask for your opinion on some specific issues.

For this purpose we attach to this questionnaire a brief description of the course.

Thanks in advance for your collaboration

DEGREE COURSE

Academic year	
Course level	Master Degree
Course name	Erasmus Mundus Joint Master Transnational German Studies
Class	LM-37
Course venue	Porto, Luxembourg, Mainz, Palermo
Department	Universidade do Porto, Université du Luxembourg, Johannes Gutenberg-Universität di Mainz, Università degli Studi di Palermo (Dipartimento Scienze Umanistiche)

YOUR ORGANISATION

Name	
Seat	
Your role within the organisation	
Date	

1. COURSE NAME

1.1 – Does the name of the Course clearly communicate the purpose of the Course itself?	Fully	Enough	A little	Not at all
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 – Comments and/or suggestions				

2. EDUCATIONAL OBJECTIVES

2.1 – Are the course educational objectives appropriate to the needs of +your company/organisation?	Fully	Enough	A little	Not at all
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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2.2 – Comments and/or suggestions	
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3. COMPETENCES/SKILLS

	Fully	Enough	A little	Not at all
3.1 – Do the competences/skills provided by the course meet the requirements for the profile provided by the course?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2 – Comments and/or suggestions				
3.3 – Which teachings, in particular, should be included or enhanced?				

4- DID YOUR COMPANY, IN THE LAST THREE YEARS, HOST STUDENTS OF THE COURSE FOR INTERNSHIP PERIODS?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
I don't know	<input type="checkbox"/>

5 – IF YOUR ANSWER WAS “YES”, PLEASE, GIVE US YOUR OPINION ABOUT THE INTERNSHIP EXPERIENCE AT YOUR COMPANY/ORGANISATION:

1 (poor)	<input type="checkbox"/>
2 (mediocre)	<input type="checkbox"/>
3 (good)	<input type="checkbox"/>
4 (excellent)	<input type="checkbox"/>

6 – WHAT ARE, IN YOUR OPINION, THE STRENGTHS OF THIS DEGREE COURSE?

7 – AND WHICH ARE THE AREAS TO IMPROVE?

Thank you for your kind cooperation