King Saud University College of Language Sciences Field Training Unit

Notice for Cooperative Training Opportunities

Field Training Manual

Students enrolled in the Translation Project and Practical Training Course (from all departments) should fill out the following form to obtain an official letter of support when searching for training opportunities.

Form link: https://forms.gle/xNvXmiaUdL5BGecN9

Note: Search for opportunities should begin at least two months prior to the semester due to high competition and limited placements at prestigious institutions.

For inquiries, contact the Field Training Unit:

Email: COLTCOOP@ksu.edu.sa

Phone: 0118054342

Criteria for Selecting Training Providers:

- 1. Government and private entities where the work environment requires interns in languages and translation.
- 2. The intern's tasks must be relevant to their major. At least 80% of the work should relate to their field.
- 3. The total number of training hours must be no less than 150 and no more than 170 hours, spread over at least 8 weeks. The specific schedule is set by agreement between the student, academic supervisor, and the training entity.
- 4. The student must maintain regular contact with their academic supervisor, and the training provider must assign an external supervisor for feedback.
- 5. The student must not have any personal or direct affiliation with the training provider.

Conditions for Training Registration:

- 1. The student must be in their final academic semester according to their degree plan.
- 2. The student must not register for more than 15 credit hours during the training semester (including the translation project course).

Registration Procedures:

- 1. Students must begin searching for training opportunities at least two months before the semester.
- 2. Submit a request for a training endorsement letter via the provided link, which opens two months prior and closes at the end of the first week of the semester.
- 3. Once accepted by a training provider, students must submit the acceptance letter to the Field Training Unit for approval.
- 4. Upon college approval, training can begin. Students must coordinate with both their academic and field supervisors throughout the training period.
- 5. All required forms must be submitted to the academic supervisor during the training.

Evaluation Criteria:

- 1. Employer Evaluation (40%)
- 2. Academic Supervisor Evaluation (20%)
- 3. Translation Samples (20%)
- 4. Final Report and Presentation (20%)

Detailed Breakdown:

- Weekly meetings with academic supervisor (20%)
- Weekly translation submissions (20%)
- Final report (10 pages max, 4 pages minimum) and presentation (20%)
- Employer's performance evaluation (40%)

Final Report Contents:

- Introduction to the training entity and reason for choosing it
- Description of tasks and actual training hours
- Challenges and how they were addressed
- Skills and knowledge gained
- Evaluation and recommendations

Forms:

- Field Training Approval Declaration Form
- Student Attendance Log
- Employer Evaluation of Intern
- Student Evaluation of Training Provider
- Field Visit Form (two visits during training)

All forms should be submitted to the Field Training Unit or via email: coltroop@KSU.EDU.SA

Student Assessment Timetable

	Assessment Task	Assessment Timing (Week)	Percentage of Total Assessment Score
1	Communication and meetings with academic supervisor	Weekly	20%
2	Submitting work and translation samples	Weekly	20%
3	Written report and presentation about the training experience	9-10	20%
4	Employer or evaluation form	9-10	40%

King Saud University College of Language Sciences Field Training Unit

Field Training Approval Declaration Form

Course: Translation Pr	•	
I, the student		, ID No.
hereby declare my app	_, roval to undertake train	ning at
I acknowledge that I ha	ave read and understoo	d the requirements and evaluation
for semester and complete the assig		, and that I agree to attend
training hours, follow a conduct and	all the regulations of the	e training provider, maintain good
professionalism, and s college and departmen		s experience and represent the
Signature	Da	te·

Intern Commencement Form

Student Name:	
College: College of Language Sciences	
Major:	
Academic Supervisor:	
Training Provider:	
Start Date of Training://	/ 14H
Field Training Supervisor Name:	
Signature:	

Attendance Sheet – Training Provider

Student Name:	
Major:	
Training Provider:	

Day	Date	Time In	Signature	Time Out	Signature	Notes

(To be signed daily by the training	supervisor)
Stamp:	Signature

Employer Evaluation Form (To Be Completed by Training Provider)

Student Name	
Training Period: From// 14_	H to/ 14H:
Student ID:	
Supervisor Name:	
Phone:	:

Evaluation	A =	B = Very	C = Good	D =	Notes
Criteria:	Excellent	Good	C = 000u	Acceptable	Notes
Attendance and	Zarceareare	0004		Ticcoptusic	
punctuality					
Seriousness and					
enthusiasm					
Compliance with					
training site rules					
Practical					
application of					
translation					
knowledge					
Productivity and					
work quality					
Positive					
relationship with					
coworkers					
Ability to work in a					
team					
Ability to work					
independently					
Discussion and					
professional					
communication					
Professional					
appearance and					
conduct					

Student Evaluation of Training Provider

Major:	
Training Provider: Course Instructor: Evaluation Fields: Seriousness of training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Evaluation Fields: Seriousness of training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Fields: Seriousness of training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Fields: Seriousness of training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Seriousness of training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
training Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Competence of field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
field supervisor Relevance of training environment to the major Cooperation of the provider and its staff	
Relevance of training environment to the major Cooperation of the provider and its staff	
training environment to the major Cooperation of the provider and its staff	
environment to the major Cooperation of the provider and its staff	
the major Cooperation of the provider and its staff	
Cooperation of the provider and its staff	
the provider and its staff	
its staff	
Adequacy of	
training duration	
Benefit gained	
from training	
Notes,	
suggestions, and	
recommendations	

This form must be submitted by the student at the end of training.

A copy must also be sent to the academic supervisor and Field Training Unit:

COLTCOOP@KSU.EDU.SA

Stamp

Field Visit Form - Translation Project Training

Course Instructor: _ Department: Training Provider: _		Section No.:	
Student name	Training Provider	First Visit (Suggested during weeks 2–3)	Second Visit (Suggested during weeks 9–10)

(This form should be filled out by the academic supervisor and sent to the Field Training Unit after visits.)