# AUT Student Learning agreement

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| **Self-assessment:** | | | |
| **Learning Objective**  What do you want to learn or develop? Consider your own competency levels and the opportunities available within this facility. | **Activities / Learning Resource**  What will you do and utilise to achieve your learning objectives? Where can you find information? Be specific, consider how you learn best. | **Outcome / Critical Reflection / Evidence**  What is the outcome of your learning activity? What evidence and when can you show your supervisor that you have met your learning objectives? | **Linked to Competency** |
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| **Self-assessment:** | | | |
| **Learning Objective** | **Activities / Learning Resource** | **Critical Reflection / Evidence/Outcome** |  |
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Date negotiated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Week: \_\_\_\_\_\_ Date completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_