



## Professional Placement Feedback Form

### Participant

<b>Name</b>	
<b>Hosting Local Government Authority</b>	
<b>Professional placement location</b>	
<b>Host supervisor's name</b>	
<b>Placement Dates</b>	

### Participant Reflection

What were your main responsibilities or observations whilst on the placement? (100 words)

What was the highlight of your placement? (100 words)

Discuss a new initiative that you have observed whilst on your placement. Can this initiative be adopted by your Library Service? How? (100 words)

How has this placement assisted in your professional development? (100 words)

Please attach an image of yourself whilst undertaking the placement for use on QPLA website. [indicate size and file types]

**Please submit the completed form within 2 weeks of the professional placement to the Development and Opportunity Working Group via [secretary@qpla.asn.au](mailto:secretary@qpla.asn.au)**