

Student Employee 30-Day and Yearly Evaluation Form

Name: _____ Evaluation Period: _____

O=Outstanding AB=Above Average S=Satisfactory NI=Needs Improvement U=Unacceptable

1. Customer Service: _____
(Displays helpful attitude and discretion toward students, staff and faculty while working)
Comments: _____

2. Job Knowledge: _____
(Demonstrates knowledge of each position worked...)
Comments: _____

3. Job Quality: _____
(Consistent, works at reasonable pace, does not need to be asked to re-do tasks)
Comments: _____

4. Initiative: _____
(Willing and capable of learning skills, eager to perform tasks when current assignment is complete, works with supervisor and strives to do more than expected...)
Comments: _____

5. Attitude: _____
(Follows instructions, accepts tasks agreeably, checks with supervisor before leaving work site, abides by policies...)
Comments: _____

6. Appearance: _____
(Presents a clean and professional appearance)
Comments: _____

Student Comments:

Student Signature

Date

Supervisor Signature

Date