

**Student Employment Performance Evaluation Form**

1. **GENERAL INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employee First Name: | Employee Last Name: | | | Student ID #: | |
| Academic Year: | Semester: | | Choose an item. | | |
| Student’s Working Title: | Type of Position: | | | | |
| Department Completing Evaluation: | | Supervisor Name: | | | Evaluation Date |

1. JOB RESPONSIBILITIES & EVALUATION

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| Complete Sections ‘B’ and ‘C’ with the following scoring system | | 1. Poor-Unacceptable performance; immediate improvement needed 2. Fair-Marginally acceptable performance; below average 3. Satisfactory-Meets the requirements of the job 4. Good-Above average 5. Excellent-Surpasses performance standards and expectations | |
| Duties/Responsibilities | Comments | | Score |
| 1. |  | | Choose an item. |
| 2. |  | | Choose an item. |
| 3. |  | | Choose an item. |

1. JOB RESPONSIBILITIES & EVALUATION CONTINUED

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| Complete Sections ‘B’ and ‘C’ with the following scoring system | | 1. Poor-Unacceptable performance; immediate improvement needed 2. Fair-Marginally acceptable performance; below average 3. Satisfactory-Meets the requirements of the job 4. Good-Above average 5. Excellent-Surpasses performance standards and expectations | |
| Duties/Responsibilities | Comments | | Score |
| 4. |  | | Choose an item. |
| 5. |  | | Choose an item. |
| 6. |  | | Choose an item. |
| 7. |  | | Choose an item. |
| 8. |  | | Choose an item. |

1. GENERAL PERFORMANCE

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| Complete Sections ‘B’ and ‘C’ with the following scoring system | | 1. Poor-Unacceptable performance; immediate improvement needed 2. Fair-Marginally acceptable performance; below average 3. Satisfactory-Meets the requirements of the job 4. Good-Above average 5. Excellent-Surpasses performance standards and expectations | |
| Comments | | | Score |
| Punctuality |  | | Choose an item. |
| Attitude |  | | Choose an item. |
| Initiative |  | | Choose an item. |
| Reliability |  | | Choose an item. |
| Amount of Work for Time Period |  | | Choose an item. |
| Overall Performance |  | | Choose an item. |

1. SUPERVISOR’S COMMENTS

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1. STUDENT’S COMMENTS

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Supervisor’s Signature Date Student Employee’s Signature Date