

Student Employment Performance Evaluation

Please provide the student with feedback regarding their performance and any areas for improvement. This is beneficial to the career and personal development of students. This form is intended for internal use only and it is not necessary to share with Career Services Student Employment.

Student Name:

Supervisor Name:

Department:

I. Please circle the response that corresponds with your evaluation of the student.

1. Verbal communication

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

2. Written communication

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

3. Ability to solve problems and apply critical thinking

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

4. Ability to take initiative on a project or assignment

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

5. Ability to plan, prioritize, and follow-up to achieve results

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

6. Willingness to learn and adapt to new processes and emerging technologies

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

7. Presents integrity and ethical behavior

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

8. Follows department's attendance policy

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

9. Works well with others including staff, students, customers, and overall campus community

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

10. Ability to organize and prioritize work

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

11. Quality of work performed

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

12. I would rate the student's overall performance as follows

Does Not Apply	Unacceptable	Needs Improvement	Average	Very Good	Exceptional
0	1	2	3	4	5

II. Please review the following questions and provide feedback to student.

13. Please identify the student's strengths.

14. What are some opportunities of improvement for the student (if any)?

III. This section is intended for you and the student to discuss together.

15. What goals (academic, work, other) do you have for the next semester? Would you like me to follow up?

16. How does your student employment job help prepare you for your future career?

17. If the student is returning to this role, are there any areas or skills you are hoping to develop or grow?

To be Completed by Employee:

EMPLOYEE ACKNOWLEDGEMENT: My supervisor and I have reviewed this document together.

Signature:

Date:

To be Completed by Supervisor:

Signature:

Date: