G(1 (D 4 4			
Student	Department:			
Name:				
Supervisor	Supervisor			
Name:	Phone #:			
C414 T-L TM				
Student Job Title:				
Date of Evaluation:				
Please rate the student in the following areas	s, with 3 being the hig	hest po	ssible ra	ting.
3=Excellent : Performance is consistently beyond	avnoctations and is co	ncictont	ly outstor	ndina
2=Satisfactory: Performance consistently fulfills	•		-	_
1=Needs Improvement: Performance does not	•			
expectations. Deficiencies should be addressed as no	•			eiow
expectations. Deficiencies should be addressed as no	ted in the performance	аррган	, di.	
Job knowledge and Skills: Demonstrates the r	required level of	1	2	3
understanding of the purpose and objectives of the job.		1	-	
Quantity and Quality of Work: Meets the established terms of the		1	2	3
job which includes job duties, required experience, skills level, and				
supervision.				
Responsiveness and Dependability: Can be relied upon to carry		1	2	3
out job duties. Reacts well to changes in workload or priorities.		1	1	
Attitude and Teamwork: Displays an attitude which positively affects the accomplishment of job duties. Works well with other students		1	2	3
and staff.	ii with other students			
Communication skills: Keeps supervisor and co-workers		1	2	3
appropriately informed. Communicates well orally and written.		1	-	
Conduct and Attendance: Display appropriate personal appearance		1	2	3
and conduct. Has acceptable attendance and punctuality records.				
Overall Rating:		1	2	3
Additional Comments: (optional)				
Student	Date:			
Signature:				
Supervisor	Dat	te:		
Signature:				