## STUDENT EMPLOYEE PERFORMANCE EVALUATION

Student's Name:							
Employer/Depart	ment:						
Review Period:		_ to					
student and o	in the circle that corresponds to each btain his signature. Retain a phoment. The original must be submitted to	otocopy for	the	studen			
			Unsatisfactory	Needs Improvement	Satisfactory	Above Average	Outstanding
QUALITY OF WORK	Accurate and thorough in job duties.		0	0	0	0	0
JOB KNOWLEDGE	Understands procedures required in job.		0	0	0	0	0
USE OF TIME	Effective and efficient use of time to accomptasks.	olish work	0	0	0	0	0
JOB JUDGMENT	Exercises sound judgment.		0	0	0	0	0
ADAPTABILITY	Ability to alter work tasks, activities, plans, e accommodate change.	etc., to	0	0	0	0	0
INITIATIVE	Ability to initiate work with minimal supervis	sion.	0	0	0	0	0
INTERPERSONAL RELATIONSHIPS	Effectively works with co-workers, supervisor public.	ors, and the	0	0	0	0	0
DEPENDABILITY	Reliable in completing tasks and keeping sup advised of progress.	pervisor	0	0	0	0	0
ATTENDANCE	Reports to work regularly and keeps supervious of schedule changes.	sor advised	0	0	0	0	0
PUNCTUALITY	Conforms to work schedule; arrives at work and ready to work.	promptly	0	0	0	0	0
COMMENTS:							
AREAS NEEDING IMPROVEMENT:							
Supervisor's Signature:		Date:					
Student's Signature:		Date:					
I recommend the student for a wage adjustment based on performance this period.							

Form due no later than 2 weeks after the semester ends. Wage adjustments effective the new term.