

STUDENT EMPLOYEE PERFORMANCE EVALUATION

Student Name _____ ID# _____ Class Year _____

Job Title _____ Dept. _____ Supervisor _____

Period Covered by Evaluation: from ____/____/____ to ____/____/____.

PART I – STUDENT SELF EVALUATION (To be completed by student prior to meeting with supervisor)

1. List the skills, knowledge, and abilities learned or enhanced in this position. If possible, provide examples.
2. Describe the strengths that you bring to the workplace.
3. Describe any challenges in this position that you have mastered or tackled.
4. Describe any challenges in this position you are currently facing.
5. Please offer any suggestions for change that could enhance the workplace for both the population served and the employee(s).

PART II – SUPERVISOR EVALUATION (To be completed by supervisor and shared with student during meeting)

Review the current job description with student and update as needed. Any changes should be attached to the evaluation and submitted to the Student Employment Office.

Circle the appropriate number that best describes the student's performance in the categories listed below based on the following scale:

1-Unsatisfactory	2- Good	3-Very Good	4-Outstanding
Service Oriented - pleasant, interested, enthusiastic, attentive	NA	1	2 3 4
Initiative -self-starter, does work on own	NA	1	2 3 4
Creativity - has new ideas, finds new approaches to problems	NA	1	2 3 4
Mastery of Job Skills – exhibited necessary skills	NA	1	2 3 4
Cooperation - works well with others, willing to do own part	NA	1	2 3 4
Dependability - reliable, trustworthy, conscientious	NA	1	2 3 4
Attendance – punctual, reliable	NA	1	2 3 4
Efficiency – accurate, thorough, completes tasks	NA	1	2 3 4
Productivity - produces desired quantity of work	NA	1	2 3 4
Care of Materials and Equipment - careful, not wasteful	NA	1	2 3 4

Additional Comments:

_____ Supervisor's Signature	____/____/____ Date	_____ Student's Signature	____/____/____ Date
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Please Note: Signatures indicate that this evaluation has been read and discussed. If there is an unresolved issue, please contact the Student Employment Coordinator.

PART III – RELEASE AND WAIVER

Your signature below authorizes the Student Employment Office to share this evaluation and to provide any and all information regarding your on campus employment in the position listed above to potential employers including department supervisors at Middlebury College.

_____ Student's Signature	____/____/____ Date
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