Student Employment Feedback Form

Student Name: ______________________________________________ Banner ID_____________________
Department: _______________________________ Position Title: ________________________________
Supervisor Name: _______________________________ Supervisor Extension ____________________

Please evaluate the student according to the following criteria, offering additional comments where appropriate:

1) Productivity: Student completes assignments in a timely manner, performs high quality work that is accurate and thorough, and manages time effectively.
   Circle one:     Excels       Meets Expectations       Needs Work

2) Punctuality: Student is responsible, dependable, punctual, has good attendance, and notifies supervisor if s/he will be late or unable to work.
   Circle one:     Excels       Meets Expectations       Needs Work

3) Attitude Toward Work: Student is enthusiastic, interested, diligent, courteous, and willing to work at difficult or disagreeable tasks.
   Circle one:     Excels       Meets Expectations       Needs Work

4) Communications Skills: Student expresses thoughts clearly and is professional in dealing with both co-workers and the public.
   Circle one:     Excels       Meets Expectations       Needs Work

5) Initiative: Student asks for work if not assigned and is able to work independently.
   Circle one:     Excels       Meets Expectations       Needs Work

6) Creativity: Student is innovative, accomplishes tasks in creative ways, and offers suggestions for new or better methods of operation.
   Circle one:     Excels       Meets Expectations       Needs Work

7) Relationships with Others: Student is tactful, diplomatic, and maintains good working relationships with co-workers, supervisor, faculty, and staff.
   Circle one:     Excels       Meets Expectations       Needs Work

8) Overall Contribution: Student contributes overall to improving the office/department.
   Circle one:     Excels       Meets Expectations       Needs Work
9) Additional Comments:

Please discuss the feedback with the student, allow for student comments and then sign below. Provide a signed copy to the student and send original to the Office of Student Employment.

__________________________________________
Supervisor’s Signature  Date

Student comments:

__________________________________________
Student Employee’s Signature  Date

Office of Student Employment
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(315)-792-3353