



Federal Work Study Program Performance Evaluation									
Student:	ID#	Department:							
Supervisor's Name:						Phone Number:			
Please select the appropriate response that represents your assessment of the student's performance within your organization. Supervisors are required to review the assessment with the student employee and both sign below. Only 1 evaluation is required per academic year, unless the student worker's performance changes and requires a second form.									
1. Please assess the following skills and knowledge in relation to the service performed by this student									
Skills and Knowledge	Importance to the Position				Level of Student's Ability				
	Low	Med	High	N/A	Low	Med	High	N/A	
Writing clearly and effectively									
Speaking clearly and effectively									
Working as part of a team									
Working effectively with diverse groups									
Trying different approaches for problem-solving									
Multi-tasking									
Making appropriate work –related decisions									
Originating new ideas									
Using appropriate computer applications									
Learning independently									
Thinking analytically									

2. How long has the student held this position? _____ years _____ months
3. To what extent does this student possess characteristics you would expect from a college student?
 ___ Exceeds expectations ___ Meets expectations ___ Does not meet expectations
4. Please rate the student's attendance record and punctuality?
 ___ Exceeds expectations ___ Meets expectations ___ Does not meet expectations
5. Overall, how would you rate this student's performance?
 ___ Exceeds expectations ___ Meets expectations ___ Does not meet expectations
6. In the near future, do you plan to hire him/her as a member of your organization? Yes No

Comments?

Supervisor's Signature

Student's Signature

Title

Date

Date

- To sign this form electronically, download/save the form to your computer first and open it by using Adobe Acrobat. Once the form is downloaded and it has been filled out completely, click in the signature box to electronically sign this document with your Adobe Signature. (see example below). You will be prompted to setup/sign using a Digital Signature at that time.



Typed signatures will not be accepted. Once it has been electronically signed, save the form to your computer, and click the SUBMIT button to email our office the electronically signed version of your form.

- If you are unable to sign electronically, please print this document and provide handwritten signatures. You may deliver this signed document in person or you may scan and email to finaid@uncw.edu