



Student Evaluation Form



Name of Student: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Evaluation: Term \_\_\_\_\_ Date \_\_\_\_\_

Students will be evaluated a minimum of two (2) times per academic year. There may be additional evaluations if the faculty member identifies the need. If any official receives a rating of 5-6 in ANY area, he/she should consider this rating as indicating that he/she needs major improvement. Consecutive 7-8 ratings in an academic year will result in possible termination for the following season.

1	2	3	4	5	6	7	8
excellent		competent		needs improvement		poor	

- \_\_\_\_\_ 1. Enthusiasm
- \_\_\_\_\_ 2. Promptness
- \_\_\_\_\_ 3. Creativity
- \_\_\_\_\_ 4. Dependability
- \_\_\_\_\_ 5. Time management/organization
- \_\_\_\_\_ 6. Ability to take direction
- \_\_\_\_\_ 7. Ability to take criticism
- \_\_\_\_\_ 8. Tact
- \_\_\_\_\_ 9. Communication skills
- \_\_\_\_\_ 10. Ability to maintain confidentiality
- \_\_\_\_\_ 11. Knowledge of referral sources
- \_\_\_\_\_ 12. Willingness to learn new skills
- \_\_\_\_\_ 13. Completion of tasks completely and accurately

Overall Rating: \_\_\_\_\_

Recommendations: \_\_\_\_\_

I have read the evaluation. \_\_\_\_\_

Student Signature