

Wayne County Community College District

801 W. Fort Street Detroit, MI 48226 (313) 496-2756 tel (313) 961-1630 fax

WORK STUDY EMPLOYEE PERFORMANCE EVALUATION

Employees must be evaluated within the academic year, but employers do not have to use this form. You may use a form already designed by your department. The Financial Aid Office must receive copies of all evaluations.

Student Name:	Student ID #:A00
Office/Department:	Supervisor:

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

Does not meet expectations
Meets some expectations but needs improvement
Meets expectations, but does not exceed them
Exhibits above average performance
Exhibits superior performance

12345 Productivity: Student completes assignments in a timely manner, performs high quality work that is accurate and thorough, and manages time efficiently.

12345 Punctuality: Student is responsible, dependable, punctual, has good attendance, and notifies supervisor if he/she will be late or unable to work.

12345 <u>Attitudes Towards Work:</u> Student is enthusiastic, interested, diligent, courteous, and willing to work at a difficult or disagreeable task.

12345 Communications Skills: Student expresses thoughts clearly and is professional in dealing with both co-workers and the public.

12345 Initiative: Student asks for work if not assigned and is able to work independently.

12345 <u>**Creativity:**</u> Student is innovative, accomplishes tasks in creative ways, and offers suggestions for new or better methods or operation.

12345 <u>Relationships with Others:</u> Student is tactful, diplomatic, and maintains good working relationships with co-workers, supervisor, faculty, and staff.

12345 Overall Contribution: Student contributes overall to improving the office/department.

Additional Comments

- 1. What kinds of educational opportunities does your department provide? How did the student take advantage of them?
- 2. Please identify some of the student's strengths or weaknesses, offering any suggestions for improvement.

Please discuss the performance appraisal with the student and sign below. The student's signature is <u>optional</u>, but encouraged. Make two copies. Forward the original performance appraisal to the Financial Aid Office. Retain one copy for your file and provide one copy to the student.

Work Study Employee Signature

Date

Work Study Supervisor Signature

Date