

STUDENT EMPLOYMENT EVALUATION



Millican Hall, Room 120 • Orlando, FL 32816-0113 • Phone: (407) 823-2827 • Fax: (407) 823-5241

Student: _____

Department _____

UCF ID/ PID: _____

Supervisor _____

Please evaluate this student in all of the following areas according to guidelines below. This evaluation will become part of the student's employment file. Please be as specific and thorough as possible in evaluating both strengths and weaknesses of the student in each category.

Use the drop arrows to assign the value for each of the criteria below.

1. Job Knowledge

A. Understanding of procedures and techniques:

B. Ability to follow instructions:

3. Quality of Work

A. Ability to do work accurately and thoroughly:

B. Achievement of goals in work:

5. Time Utilization

A. Planning and organization:

B. Ability to prioritize:

C. Ability to meet deadlines:

7. Attitude

A. Interest and enthusiasm:

B. Effort:

C. Receptiveness to criticism:

2. Dependability

A. Follows through on assignments:

B. Keeps supervisor informed of significant matters:

4. Initiative

A. Originates ideas:

B. Ability to anticipate what needs to be done:

6. Judgment

A. Ability to analyze a problem, develop alternatives, and arrive at a logical decision:

8. Communication

A. Ability to communicate effectively (written & verbal):

9. Cooperation

A. Interaction with peers

B. Interaction with supervisor:

Additional Comments: _____

Please rate the student's overall performance by checking one:

Outstanding

Needs Improvement

Above Average

Unsatisfactory

Average

Did not work long enough to rate

Supervisor's Signature _____

Date _____

OPTIONAL: Student authorization for release of information.

I, _____
authorize the release of this information for
future employment references.

Student's Signature _____

Date _____