

## FEDERAL WORK STUDY EVALUATION SHEET

Work Study Supervisors: Please complete one form for each of your work study students and return to the Human Resources Office, 103 Bush Hall.

Student's Name:					
Student's ID#:					
Semesters Worked:		Fall	Spring	Summe	er er
Approximate hours worked per week:					
Student's Attendance	e:	Excellent [	Satisfactory	Unsatis	factory
Student's Job Performance:		Excellent [	Satisfactory	Unsatis	factory
**If you rated a student as "unsatisfactory" please give an explanation here with suggestions for improvement:					
Additional comments that you wish to add regarding your student:					
Supervisor's Name:					
Department:					
Date:					