

The University of Akron Student Employee Evaluation Form

Student Employee's Name _____ Job Title _____

Evaluation Period _____ Date _____

Please rate the student employee's performance in the areas listed, using the rating scale below.

NOTE: There is a section for both the employee and the supervisor to provide a rating.

1 -Exceeds Expectations 2- Meets Expectations NI- Needs Improvement N/A- Not Applicable

Competencies	Employee Rating	Supervisor Rating
<p><u>QUALITY OF WORK:</u> <i>Achieves satisfactory results for duties and tasks completed</i> Comments:</p>		
<p><u>QUANTITY OF WORK:</u> <i>Works effectively and efficiently; tasks done in a timely manner; handles multiple tasks; demonstrates effective time management</i> Comments:</p>		
<p><u>RELIABILITY:</u> <i>Attendance, punctuality, job completion, ability to get things done, conscientiousness</i> Comments:</p>		
<p><u>KNOWLEDGE AND SKILLS:</u> <i>Demonstrates working level of skill/knowledge in area of expertise. Applies professional and technical expertise to best meet department/area needs</i> Comments:</p>		
<p><u>PROFESSIONALISM:</u> <i>Interacts well with others in the office; conducts him/herself professionally; professional appearance; maintains confidentiality</i> Comments:</p>		
<p><u>ATTITUDE and INITIATIVE:</u> <i>Interest in assuming added responsibilities does not argue or complain when given task, checks with supervisor before leaving work site, follows handbook policies</i> Comments:</p>		
<p><u>LEADERSHIP and TEAMWORK:</u> <i>Demonstrates leadership ability; works in a team</i> Comments:</p>		
<p><u>COMMUNICATION:</u> <i>Exercises solid listening, written, and oral communication skills.</i> Comments:</p>		

General Comments (includes areas of strength and areas needing improvement):

Supervisor Signature _____

Date _____

Student Employee Signature _____

Date _____