

Financial Aid/Student Employment Office 103 John Wilder Tower

## STUDENT EVALUATION FORM

Name				U ID Number			
Job Type				Current Hourly Rate			
Department Name				Job Description (attach a copy of description)			
Dates of Employment	:						
Length of time employee has worked in this position:							
Job Performance Rating							
Circle an appropriate rating number for the employee	Unsatisfactory	Below Standard	Standard	Above Standard	Outstanding	Not Applicable	
Reliability	1	2	3	4	5	N/A	
Quality of work	1	2	3	4	5	N/A	
Demonstrates							
initiative	1	2	3	4	5	N/A	
Works well with							
others	1	2	3	4	5	N/A	
Flexibility	1	2	3	4	5	N/A	
Customer Service	1	2	3	4	5	N/A	
Comments to support numerical ratings:  General Comments:							
Would you recommend this employee to another department or employer?  Yes  Signed By						No	
Supervisor:					Date:		
Student Employee:					Date:		

Note: The signature of the student employee does not signify that the student employee agrees with the evaluation, only that it has been discussed with the student employee.

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