



San Juan College

Center for Student Engagement
Office of Retention
Service Learning

4601 College Boulevard Suite 1717 • Farmington, New Mexico 87402 • (505) 566-3120

Host Site Evaluation of STUDENT

Student Name: _____ Hours Completed _____
Instructor: _____ Course _____

Host Site Supervisor: Please fill out this form when the student has completed his/her service learning hours at your site and give the form back to the student.

Strongly Agree/ Agree/ Neutral/ Disagree/ Strongly Disagree

- | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Student cooperated with clients and staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Student contributed to the mission of the site. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Student performed tasks assigned. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Student followed rules and procedures. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Overall performance of student at site

Additional comments

Host Site representative signature

Phone or e-mail

Organization

Date:
