

Student Employee Evaluation Form 2012-2013

Please return to the Office of Financial Aid no later than April 1.

Student Name		Banner ID			
Supervisor	Departmen	Department			
Please rate the above-named st box N/A.	tudent by placing a ch	eck mark on Average	the appropriate line. If a transfer Above Average	rait does not apply	, indicate by marking the
Quality of Work					
Quantity of Work					1
Attitude Toward Work					1
Initiative and Originality					
Dependability					
Please do not leave any of the N/A. If questions 2 and 3 are	following section blar	nk. If you kn	ow your employee will no		ark questions 2 and 3 with
Have you discussed this evaluation with the student? Please			YES	NO	
note it is highly recommended that you do so.					
If this student is eligible for Work-Study/Work Scholarship for the next academic year, do you wish him/her assigned to your department?					
If yes, does this student's performance justify an hourly rate increase?					
NOTE: Sewanee requires an e	valuation of student e	mployees ann	nually. Students are notifi	ed evaluations are	on file.
Printed Name of Supervisor				Date	
Signature of Supervisor					Date

Your cooperation is deeply appreciated as this information is used to make assignments for the upcoming academic year and apply wage increases where applicable for our student employees.