

SEWANEE

THE UNIVERSITY OF THE SOUTH

Student Employee Evaluation Form 2011-2012

Please return to the Office of Financial Aid no later than **March 31.**

Student Name _____ Banner ID _____

Supervisor _____ Department _____

Please rate the above-named student by placing a check mark on the appropriate line. If a trait does not apply, indicate by marking the box N/A.

	Below Average	Average	Above Average	Exceptional
Quality of Work				
Quantity of Work				
Attitude Toward Work				
Initiative and Originality				
Dependability				

Remarks: _____

Please do not leave any of the following section blank. If you know your employee will not be returning, mark questions 2 and 3 with N/A. If questions 2 and 3 are left blank, the employee will not be approved for a longevity raise.

	YES	NO
Have you discussed this evaluation with the student? Please 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 evaluation of student employees annually. Students are notified 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.