

# Annual Student Employment Self Evaluation



Student Employment Office TCC 210 Phone: (310) 506-4177

Student Employment Office

Name: \_\_\_\_\_

Department: \_\_\_\_\_ CWID: \_\_\_\_\_

*Directions: Place the appropriate number in the space provided that you believe best describes your performance using the following point system:*

1. Needs Improvement 2. Average 3. Above Average 4. Excellent

### Punctuality/Dependability (Please rate your ability to . . .)

Arrive to work on time for each scheduled shift. \_\_\_\_\_

Provide notice when you are unable to report to work. \_\_\_\_\_

Comments:

### Work Performance (Please rate your ability to . . .)

Perform tasks in a timely manner. \_\_\_\_\_

Follow directions accurately. \_\_\_\_\_

Take initiative to begin new tasks (self-starter). \_\_\_\_\_

Complete and approve Kronos timecard accurately and on time. \_\_\_\_\_

Comments:

### Communication (Please rate your ability to . . .) Ask questions when

necessary. \_\_\_\_\_

Improve work performance when given constructive criticism \_\_\_\_\_

Gets along well with co-workers/ team player \_\_\_\_\_

Exhibit professionalism in job responsibilities. \_\_\_\_\_

Comments:

**Total Points** \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date