



# Wayne County Community College District

801 W. Fort Street

Detroit, MI 48226

(313) 496-2756 tel

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## WORK STUDY EMPLOYEE PERFORMANCE EVALUATION

Employees must be evaluated within the academic year, but employers do not have to use this form. You may use a form already designed by your department. The Financial Aid Office must receive copies of all evaluations.

<b>Student Name:</b>	<b>Student ID #:A00</b>
<b>Office/Department:</b>	<b>Supervisor:</b>

Please evaluate the student according to the following criteria, offering additional comments where appropriate:

- |                    |   |
|--------------------|---|
| 1 = Unsatisfactory | Does not meet expectations                    |
| 2 = Below Average  | Meets some expectations but needs improvement |
| 3 = Satisfactory   | Meets expectations, but does not exceed them  |
| 4 = Very Good      | Exhibits above average performance            |
| 5 = Exceptional    | Exhibits superior performance                 |

**1 2 3 4 5**      **Productivity:** Student completes assignments in a timely manner, performs high quality work that is accurate and thorough, and manages time efficiently.

**1 2 3 4 5**      **Punctuality:** Student is responsible, dependable, punctual, has good attendance, and notifies supervisor if he/she will be late or unable to work.

**1 2 3 4 5**      **Attitudes Towards Work:** Student is enthusiastic, interested, diligent, courteous, and willing to work at a difficult or disagreeable task.

**1 2 3 4 5**      **Communications Skills:** Student expresses thoughts clearly and is professional in dealing with both co-workers and the public.

**1 2 3 4 5**      **Initiative:** Student asks for work if not assigned and is able to work independently.

**1 2 3 4 5**      **Creativity:** Student is innovative, accomplishes tasks in creative ways, and offers suggestions for new or better methods or operation.

**1 2 3 4 5**      **Relationships with Others:** Student is tactful, diplomatic, and maintains good working relationships with co-workers, supervisor, faculty, and staff.

**1 2 3 4 5**      **Overall Contribution:** Student contributes overall to improving the office/department.

**Additional Comments**

1. What kinds of educational opportunities does your department provide? How did the student take advantage of them?
  
2. Please identify some of the student's strengths or weaknesses, offering any suggestions for improvement.

**Please discuss the performance appraisal with the student and sign below. The student's signature is optional, but encouraged. Make two copies. Forward the original performance appraisal to the Financial Aid Office. Retain one copy for your file and provide one copy to the student.**

\_\_\_\_\_  
**Work Study Employee Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Work Study Supervisor Signature**

\_\_\_\_\_  
**Date**