

STUDENT EMPLOYEE EVALUATION FORM

Department of Student Financial Assistance

340 Potter Hall

Complete the following for annual evaluation. Return the original copy to Student Employment and retain a copy for your files.

Section I: Student and Departmental Information

Student Name

WKU ID

Department

Banner Index Number

Section II: Employee Evaluation

Evaluate the student employee according to the following criteria and then discuss the evaluation with the student employee. Lines are provided for any additional comments you may wish to make. Both supervisor and employee should sign this form as indicated in Section IV. If the student was not under your employ long enough to evaluate, indicate this under 'comments.'

FOR ACADEMIC YEAR _____

CRITERIA	Excellent	Good	Fair	Poor
Quality of Work				
Quantity of Work				
Reliability				
Attitude Toward Work				
Cooperation				
Initiative				
Overall Rating				

Comments: _____

Section III: Signatures. Both supervisor and employee should sign where indicated. **NOTE:** If the student was not available for signature, please indicate.

Supervisor Signature

Date

Student Authorization: My employer has discussed this evaluation with me and I have reviewed it. I authorize the release of information on this evaluation to potential future employers.

Student Signature

Date