

Financial Aid/Student Employment Office
103 John Wilder Tower

Office: (901)-678-4825
FAX: (901) 678-5902

STUDENT EVALUATION FORM

Name _____ U ID Number _____

Job Type _____ Current Hourly Rate _____

Department Name _____ Job Description (attach a copy of description)

Dates of Employment: _____

Length of time employee has worked in this position: _____

Job Performance Rating

Circle an appropriate rating number for the employee	Unsatisfactory	Below Standard	Standard	Above Standard	Outstanding	Not Applicable
Reliability	1	2	3	4	5	N/A
Quality of work	1	2	3	4	5	N/A
Demonstrates initiative	1	2	3	4	5	N/A
Works well with others	1	2	3	4	5	N/A
Flexibility	1	2	3	4	5	N/A
Customer Service	1	2	3	4	5	N/A

Comments to support numerical ratings:

General Comments:

Would you recommend this employee to another department or employer?

Yes No

Signed By

Supervisor: _____

Date: _____

Student Employee: _____

Date: _____

Note: The signature of the student employee does not signify that the student employee agrees with the evaluation, only that it has been discussed with the student employee.