### STUDENT EMPLOYEE REVIEW

Employee Name: __________________________  Social Security #: __________________
Department: ____________________________  Supervisor: ____________________________
Job Title: ________________________________  Job Level: _____________________________

**Instructions:** Employers, please complete this form for all students who work in your office or lab. This evaluation can be used per semester and/or annually. Circle the appropriate number after each question based on the student’s work habits and performance. Please return to the Student Employment Office.

**Purpose:** To provide the student with constructive feedback necessary to enhance their work performance and professional development. This form is also for your use in evaluating student merit increases. Direct all questions to Student Employment Office at 508-999-8647.

1 = Above Expectations  
2 = Meets Expectations  
3 = Needs Improvement

1. Carries out assigned duties.  
2. Adheres to assigned work schedule.  
3. Keeps work area clean and neat.  
4. Demonstrates willingness to learn new skills.  
5. Accepts new responsibilities.  
6. Interacts well with others.  
7. Demonstrates willingness to follow directions.  
8. Maintains confidentiality of departmental records and other information.  
9. Adheres to departmental policies regarding office etiquette (i.e. dress code, visitor policy, etc.)  
10. Approaches job in a professional and conscientious manner.

Would you hire this student again?  Yes  No

**Supervisor’s Comments**

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**Student’s Comments**

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