

WEST TEXAS A&M UNIVERSITY

Student Employee Performance Evaluation

SECTION A

Name:	Position Title:
Department:	Date of Evaluation:

SECTION B

Evaluation Key: 1. Unsatisfactory 2. Needs Improvement 3. Good 4. Very Good 5. Outstanding
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B-1 Mandatory Factors (Evaluate ALL Mandatory Factors)	RATING	NARRATIVE COMMENTS
1. Attendance: Absenteeism: Punctuality: Remaining on the job. Personal appearance		
2. Quality of work: Accuracy: Neatness: Thoroughness: Competence		
3. Work habits: Observes work and safety rules: Follows instructions.		
4. Initiative: Self-Starter: Finds work to do: Self-Motivated.		
5. Dependability: The degree to which employee can be relied upon to get the job done.		
6. Relationship with others: Interpersonal skills: Cooperativeness: Effectiveness in getting along with employees and others.		
7. Quantity of work: Amount of acceptable work accomplished.		
8. Adaptability: Effectiveness in adjusting to new or different assignments.		
9. Judgement and common sense: Effectiveness in making sound decisions and taking correct actions.		
10. Attitude: Toward students, school, co-workers and self.		

B-2 Optional Factors (Evaluate if appropriate for job)	RATING	NARRATIVE COMMENTS
1. Public Contact: Manner in dealing with and helping the public		
2. Planning and organizing work: Effective and efficient utilization of time & resources		
3. Communications (Oral and written): Effective expression.		
4. Supervisory ability: Leadership: Getting work done through others: Training subordinates.		
5. Management ability: Effective and economical management of department, division or program.		
6. Other (specify):		
B-3 OVERALL EVALUATION		

Section C – EMPLOYEE DEVELOPMENT (Give suggestions as to what employee can do to develop or improve performance and what the Evaluator can do to assist.)

Section D – SIGNATURE OF SUPERVISORS

This report is based on my observation and/or knowledge. It represents my best judgement of the employee’s performance.

Signature of Evaluator _____ Date _____

Signature of Administrative Officer _____ Date _____

Section E – EMPLOYEE ACKNOWLEDGMENT

I reviewed this report and had the opportunity to discuss it with my supervisor. My signature does not necessarily mean that I agree with the report. I understand I may attach comments if I desire.

Signature of Employee _____ Date _____