

STUDENT EMPLOYEE PERFORMANCE EVALUATION

(Supervisor Form)

Review Period: Fall 2022 / Spring 2023

tudent Start Date:	End Date
tudent Start Date:	Ena D

STUDENT & POSITION INFORMA	TION						
Student Name:		Student ID: 000					
Position# Jo	b Title:						
CAREER COMPETENCY RATIN	GS View NACE Com	petency Defir	nitions and Sample	Behaviors H	<u>ere</u>		
	Excellent	Good	Satisfactory	Improver Neede		Unsatisfactory	Too New to Rate/ Not Applicable
Career and Self-Developmen	t						
Communication							
Critical Thinking							
Equity and Inclusion							
Leadership							
Professionalism							
Teamwork							
Technology							
Job Knowledge/Skills							
Use the space below (700 character lin development. If you need additional sp							
aovolopinoni. Il you noou additional op	acc, acc a word ac	ouri irromod	word minity and all	idon tho w	ora a	odinone to your n	ndi roviow.
Supervisor: I have completed this performance in the above position		nd participa	ated in a discuss	sion with th	ne stu	ıdent above rega	arding his/her
Supervisor has reviewed Student S	elf-Evaluation						
Supervisor met with Student on Dat	e:	Remotely	(Zoom or Phone) 0	R	In-Person	
Supervisor Name (Print/Type):				Date:			

AFTER ABOVE INFO. IS FILLED OUT, **SAVE THE FORM** TO YOUR COMPUTER.. You will need it to review with the student, sign and submit to the Student Employment Office. The student may also ask for a copy of it.