

EVALUATION OF CO-OP STUDENT



The Co-op student' supervisor should complete this form and discuss it with the student near the end of each work term. Frequent communication (with or without the form) is encouraged to enhance understanding regarding performance and to facilitate development during the work term. The student must return

The completed form to:

Faculty name
Texas A&M University
MS XXXX*
College Station, TX 77843-XXXX

*Find your Faculty Advisor's Mail Stop on the attached list. Include your advisor's mail stop in the zip code.

A copy or fax to:

Experiential Education Programs
Texas A&M University
TAMU 1476
College Station, TX 77843-1476
Fax: 979-845-0067

Also update your campus address and bring this form to our office after returning to campus.

Name: _____ Classification: _____ Major _____
Work Term Number: 1 2 3 4 5 Completed during: Fall Spring Summer 20 _____
Employer: _____ Location: _____

SKILL (Please check appropriate responses)	Exceeds Standards	Meets Standards	Needs Some Improvement	Needs Much Improvement
1. Possess necessary technical knowledge	_____	_____	_____	_____
2. Adapts to changing work assignments and situations	_____	_____	_____	_____
3. Able to cooperate and work with others	_____	_____	_____	_____

Please comment on deficiencies or exceptional points: _____

PERFORMANCE	Exceeds Standards	Meets Standards	Needs Some Improvement	Needs Much Improvement
4. Listens and carries out instructions	_____	_____	_____	_____
5. Works effectively without close supervision	_____	_____	_____	_____
6. Meets deadlines and schedules	_____	_____	_____	_____
7. Produces acceptable quality of work	_____	_____	_____	_____
8. Produces acceptable quantity of work	_____	_____	_____	_____

Please comment on deficiencies or exceptional points: _____

Judgment	Exceeds Standards	Meets Standards	Needs Some Improvement	Needs Much Improvement
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9. Demonstrates ability to make decisions or seek appropriate help _____
10. Shows problem solving ability _____

Please comment on deficiencies or exceptional points: _____

ATTITUDE	Exceeds Standards	Meets Standards	Needs Some Improvement	Needs Much Improvement
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11. Accepts responsibility and is a self-starter _____
12. Exhibits interest and enthusiasm about the job _____
13. Maintains appropriate dress and grooming habits _____
14. Maintains good attendance and tardiness record _____
15. Adheres to organizational regulations _____

Please comment on deficiencies or exceptional points: _____

Additional comments about performance and/or areas for improvement: _____

SUPERVISOR'S OVERALL EVALUATION OF STUDENT'S PERFORMANCE

- | | |
|-----------------------------|---------------------------------------------|
| _____ Excellent Performance | Student significantly exceeded expectations |
| _____ Above Expectations | Student performed better than expected |
| _____ Met Expectations | Student performed satisfactorily |
| _____ Below Expectations | Student requires improvement |

Evaluation has been discussed with student Yes No

Number of weeks worked during present Co-op assignment: _____

Start date of next work assignment: _____

Supervisor's name (print): _____ Phone: _____

Supervisor's signature : _____ Date: _____

Supervisor's Email: _____