

Service-Learning Student Performance Evaluation

Due:

Students: Please have your agency/site supervisor complete the evaluation below and return the completed form to your instructor or the Service-Learning Coordinator by the assigned due date.

Agencies: Please assess the student’s service-learning performance by completing the evaluation below. Place a check mark in the appropriate column.

Performance Rating	Excellent	Good	Satisfactory	Poor
Quality of work				
Willingness to work				
Cooperative attitude				
Works well with others				
Acceptance of supervision				
Takes initiative				
Courtesy				
Dependability				
Professional appearance				
Punctuality and attendance (Did the student call if late or absent?)				

Comments: _____

Supervisor’s Name (Please print): _____

Agency name and phone number: _____

I certify that the evaluation above is an accurate assessment of the student’s service learning performance.

Supervisor’s signature: _____ Date: _____