

# Employment Evaluation Form

**Work-Study Name:**

**Palomino ID:**

**Supervisor Name:**

**Department:**

**Semester:**

**Is Work-Study Returning Next Semester:** Yes ☐ No ☐

Performance	Rating 1-5	Comments
5 – Superior 4 – Above Average 3 – Average 2 – Below Average 1 – Poor		
Attendance and Punctuality		
Quality of Work (Customer Service) and Attention to Details		
Judgement and Decision-Making		
Initiative and Flexibility		
Teamwork and Cooperation		
Communication Skills		
Dress Code Adherence		

**Strengths and Areas of Improvement**

**Performance Meeting Date:**

**Time:**

**Work Study**

**Supervisor**

**Signature:**

**Signature:**