



**CAREER PREPARATION PROGRAMS
WORK EXPERIENCE**

EMPLOYER EVALUATION

PLEASE RETURN TO:

Student: _____

Teacher: _____

Sponsoring Company: _____

School: _____

Name of Supervisor: _____

Fax: _____

Supervisor's email: _____

Phone: _____

Dates of Work Experience _____

email: _____

Please assess this work experience student as you would an entry-level employee in your work place. Place a check mark (✓) at the most appropriate level.											
		4 (exemplary)	3 (meets expectations)	2 (minimally meets expectations)	1 (not yet meeting expectations)	N/A	4	3	2	1	
TEAM	shows a positive attitude and is enthusiastic to learn and participate										
	is cooperative, respectful and works well with others										
	makes a positive contribution to the workplace/community										
	accepts constructive criticism and changes behavior accordingly										
PERSONAL MANAGEMENT	shows a willingness to take initiative										
	shows an ability to concentrate on the tasks assigned										
	completes projects, assignments and tasks accurately and within time lines										
	is dressed and groomed appropriately for the job										
COMMUNICATION	abides by company policies related to break times and hours of work										
	can use technology specific to the workplace										
	is attentive, listens and follows directions										
	is easily understood										
OTHER	asks appropriate questions and can articulate thoughts or ideas										
	Shows capacity to identify potential workplace concerns or issues										
Place a check mark (✓) inside the most appropriate box											
OTHER	follows confidentiality policies/guidelines					meets expectations		does not meet expectations			
	is punctual					<input type="checkbox"/>		<input type="checkbox"/>			
	observes safety rules and regulations					<input type="checkbox"/>		<input type="checkbox"/>			
Comments on student's performance _____											

Overall Rating (✓)											
<input type="checkbox"/> (exemplary) <input type="checkbox"/> (meets expectations) <input type="checkbox"/> (minimally meets expectations) <input type="checkbox"/> (not yet meeting expectations)											
Please discuss this report with the student before signing. Fax, scan or email a copy to the teacher and return original to the student.											
Workplace Supervisor Signature _____					Date _____						
Student Signature _____					Date _____						