

**Student Self-Evaluation**

**RETURN YOUR COMPLETED WORK AS FOLLOWS TO YOUR TEACHER:**

Student: \_\_\_\_\_ Student Self-Evaluation

Sponsoring Company: \_\_\_\_\_ Student Work Experience Report

Name of Supervisor: \_\_\_\_\_ Revised Resume

Supervisor's email: \_\_\_\_\_ Student Safety Questionnaire

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Employer Evaluation

Dates of work experience \_\_\_\_\_ Student Report on Worksite

Total hours worked \_\_\_\_\_ Teacher name: \_\_\_\_\_

**Place a check mark (✓) at the most appropriate level.**

|                            |  | 4                    | 3                  | 2                            | 1                            | n/a | 4 | 3 | 2 | 1 |
|----------------------------|--|----------------------|--------------------|------------------------------|------------------------------|-----|---|---|---|---|
|                            |  | Exceeds expectations | Meets expectations | Minimally meets expectations | Not yet meeting expectations |     |   |   |   |   |
| <b>TEAM</b>                | 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            |                      |                    |                              |                              |     |   |   |   |   |
| <b>PERSONAL MANAGEMENT</b> | 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                           |                      |                    |                              |                              |     |   |   |   |   |
| <b>COMMUNICATION</b>       | 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   |                      |                    |                              |                              |     |   |   |   |   |
|                            | asks appropriate questions and can articulate thoughts or ideas            |                      |                    |                              |                              |     |   |   |   |   |
|                            | Shows capacity to identify potential workplace concerns or issues          |                      |                    |                              |                              |     |   |   |   |   |

| <b>Place a check mark inside the most appropriate box</b> |   | meets expectations       | does not meet expectations |
|---|---|--------------------------|----------------------------|
| <b>OTHER</b>  | follows confidentiality policies/guidelines | <input type="checkbox"/> | <input type="checkbox"/>   |
|   | is punctual                                 | <input type="checkbox"/> | <input type="checkbox"/>   |
|   | observes safety rules and regulations       | <input type="checkbox"/> | <input type="checkbox"/>   |

**Student Self-Evaluation**

**To the best of your ability, complete the following sections giving as much detail as possible.**

|                                    |  |
|------------------------------------|--|
| <b>Tasks performed by student:</b> |  |
|                                    |  |
|                                    |  |
|                                    |  |

|                           |  |
|---------------------------|--|
| <b>Areas of strength:</b> |  |
|                           |  |
|                           |  |
|                           |  |

|                          |  |
|--------------------------|--|
| <b>Areas to work on:</b> |  |
|                          |  |
|                          |  |

|                        |  |
|------------------------|--|
| <b>Other comments:</b> |  |
|                        |  |
|                        |  |

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date