

School of UNDERGRADUATE STUDIES

Student Academic Employee Evaluation Form

(TAs, GRAs, and GAs)

University policy requires that we have in our files written evaluations of the performance of our student academic employees each semester they are employed (HOP 12.C.1 I.1). Please take a few moments to complete the evaluation below, rating your student academic employee on each listed attribute on a scale of A (excellent) to E (poor) and adding any further comments you think relevant. We appreciate (and need) your honest feedback and welcome your comments.

Name		
EID		
Course (if applicable)		
Faculty/Supervisor		
Date		
Please use the dropdown me "E" indicating Poor.	enus to choose your ranking, w	ith "A" indicating Excellent and
Reliability		
Initiative		
Promptness		
Helpfulness		
Communication Skills		
Attitude		
Other (Specify)		
If you have additional comments about this employee's performance in any of the above areas, please use the space below.		
I have read and reviewed my evaluation with my supervisor.		
Employee Signature		Date
Faculty/Supervisor Signature		Date
This document is confidential and a co- will be made available to administrative the supervising faculty/supervisor discu	opy will be made available to the emplo we staff and faculty whose duties require	vacy define the distribution of this document. yee evaluated above. The information also access to the information. We suggest that udent before submitting it to us. The student student file.
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