



UNIVERSITY OF SOUTH ALABAMA

FEDERAL WORK STUDY (FWS) STUDENT EVALUATION FORM

Complete the following annual evaluation no later than April 15.
Return the form to the Office of Financial Aid by Fax or E-mail. Retain a copy for your files.

Section 1: Student and Department Information

Student Name, Jag Number, Department / School, Supervisor Name

Section 2: Employee Evaluation

Evaluate the student employee according to the following criteria and then discuss the evaluation with the student. Lines are provided for any additional comments you may wish to make.

FOR ACADEMIC YEAR: \_\_\_\_\_

Please check the appropriate rating below

Table with 5 columns: CRITERIA, Excellent, Good, Fair, Poor. Rows include Quality of Work, Quantity of Work, Reliability, Attitude Towards Others, Cooperation, Initiative, Overall Rating.

Comments:

Three horizontal lines for writing comments.

Section 3: Signatures - Both supervisor and employee should sign where indicated. If the student is not available for signature, please indicate.

Supervisor Name, Date

Student Authorization: My Supervisor has discussed this evaluation with me and I have reviewed it. I authorize the release of information on this evaluation to potential future employers.

Student Name, Date