CLARK COLLEGE COOPERATIVE EDUCATION Gaiser Hall 108 | 1933 Fort Vancouver Way, Vancouver, WA 98663-3598 | (360) 992 2391

Employer Evaluation of Student

Student Name Supe					Supe	ervisor Name
Student Job Title Com					Com	pany/Agency Name
Co-op Course					Phor	ne Extension
Quarter					Year emai	I
						1
Outstanding Very Good	Good	Average	Needs Improvement	Not Applicable		What are some of the student's strengths?
		A	N	N	ATTITUDES TOWARD WORK Uses time effectively and looks for work to do	
					Dresses appropriately for job setting	What areas of work does the student need to improve?
					Exhibits cleanliness, good hygiene	That areas of the state in state in the stat
					Demonstrates continual improvement in completing work	
					RELATIONS WITH OTHERS Cooperates with supervisors; is respectful	
					Works well with others and within a team	
					Accepts suggestions from others well; is courteous and helpful with public/customers Overall communication skills	What recommendations do you have to better prepare this student for the career he/she has chosen?
					DEPENDABILITY Is on time to work; completes required hours Alerts supervisor if absent or late for work Plans ahead to rearrange work schedule	
					JOB LEARNING/SKILL IMPROVEMENT Shows continual improvement & speed completing work Can work independently Exhibits adequate knowledge learned in classroom. Learns with ease; understands work/ responsibilities	This evaluation has been completed, comparing this student to: Other Students Other Employees What you feel this student is capable of doing Other Has this report been discussed with the student? Yes No Was student hired during internship period?
					QUALITY OF WORK Uses care with equipment and materials Performs quality work Able to follow and understand directions Performs well under pressure	
					Can adapt to working conditions; is flexible EVALUATION OF OBJECTIVES Objective #1 Objective #2	☐ Yes ☐ No If yes, specify start date:
					Objective #3	
					Objective #4	By checking the box, I acknowledge that the
					Objective #5	information provided in this form is true. Employer Signature Date
					OVERALL PERFORMANCE	