Graduate Assistant Performance Evaluation

The performance evaluation is intended to encourage professional growth and constructive communication between you, the graduate assistant, and your faculty supervisor(s). Review this evaluation form and fill it out first. Then make an appointment with your supervisor(s) to discuss your performance. If you had more than one supervisor during the semester, make an appointment with each. After your meeting, make a copy of the form for your own file. Submit the original SIGNED, PRINTED performance evaluation form to Elizabeth Goebel’s mailbox by the deadline. (**Fall: Dec 21, Spring: May 24).**

|  |  |  |
| --- | --- | --- |
| Your Name | Your Supervisor’s Name | Track/Degree |
|  |  |  |
| Appointment(s) | Courses/Project | % |
| Graduate Instructor  TA  RA |  |  |

**Performance Ratings**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Rating\* | | Comment |
| Student | Supervisor |
| Technical skills related to the job |  |  |  |
| Work quality |  |  |  |
| Work consistency |  |  |  |
| Initiative/self-autonomy |  |  |  |
| Communication skills |  |  |  |
| Ability to meet deadlines |  |  |  |
| Organization/management ability |  |  |  |

\*1=below expectation; 2=meet expectation; 3=exceed expectation; N/A=not applicable

**Performance Reflection and Feedback**

|  |  |
| --- | --- |
| What are your strengths in performing the assigned duties? | |
| Student |  |
| Supervisor |  |
| What are opportunities for improvement and how could you improve in the future? | |
| Student |  |
| Supervisor |  |

|  |
| --- |
| Supervisor’s evaluation of the graduate student’s professional potential |
|  |

*Signing below indicates that you have seen and reviewed this evaluation. If you disagree with any part of the evaluation, you may submit a separate letter of explanation to the Department Head.*

Graduate Assistant Signature Date

Faculty Supervisor Signature Date

Department Head Signature Date