

EVC CENTER FOR SERVICE-LEARNING & PUBLIC SERVICE

SUPERVISOR'S EVALUATION OF STUDENT

Community Service-Learning

| | |
|-------------------------------------|--------------------------------|
| Student Name _____ | Semester/Year _____ |
| Student ID # _____ | Agency Name _____ |
| Course & Section # _____ | Supervisor's Name _____ |
| REG ID # _____ | Title _____ |
| Instructor _____ | Phone _____ |
| Days/Time _____ | Email _____ |

PLEASE CHECK THE APPROPRIATE RESPONSES

| | Excellent | Good | Fair | Poor | Cannot Rate |
|--|-----------|------|------|------|-------------|
| Student Reliability (punctual, meets obligations, follows through) | | | | | |
| Professional (polite, courteous) | | | | | |
| Adaptability (learns quickly, follows direction, flexible) | | | | | |
| Willingness to Learn (open to learning new things, receiving feedback) | | | | | |
| Sensitivity to Others (sensitive to other's needs, respects differences) | | | | | |
| Communication skills (listening, speaking, writing) | | | | | |
| Overall performance for Community Service-Learning volunteer | | | | | |

Additional comments or recommendations:

Supervisor's Signature _____

Date _____

Supervisor: please email completed evaluation of student to evcservicelearning@evc.edu or return in a sealed envelope.