

**THE SCHOOL BOARD OF ST. LUCIE COUNTY
COMMUNITY SERVICE ORGANIZATIONS EVALUATION OF STUDENT**

RETURN BY: _____

Name of Student Trainee	Name of High School	Name of coordinator	Name of Program			
			1	2	3	4
Name of Company	Student's Job Title	Name of Supervisor	Grading Period			

DIRECTIONS: The purpose of this evaluation is to provide feedback necessary to improve the student trainee's on-the-job performance. This evaluation will be one factor in determining the final grade that will be recorded on the student's report card. Using the rating scale listed below, circle the appropriate number to the right of the characteristic or specific competency to indicate the level of job performance:

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|-------------------------|-------------|----------------------|
| 4; = Excellent | 2 = Average | O = Unsatisfactory |
| 3 = Better than Average | 1 = Poor | N/A = Does not Apply |

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|--|---|---|---|---|---|-----|
| 1. Appearance: clean, well groomed | 4 | 3 | 2 | 1 | O | N/A |
| 2. Communication: uses correct English writing skills, speaks clearly, listens attentively | 4 | 3 | 2 | 1 | O | N/A |
| 3. Attitude: works well with others, shows enthusiasm, loyal to company, courteous to all | 4 | 3 | 2 | 1 | O | N/A |
| 4. Attendance and Punctuality: times absent _____; times tardy _____ | 4 | 3 | 2 | 1 | O | N/A |
| 5. Cooperation: accepts responsibility, respectful to supervisors, cares for working area, avoids rash decisions, gets along with other employees | 4 | 3 | 2 | 1 | O | N/A |
| 6. Quality of Work: neat, accurate, follows instructions, meets work specifications | 4 | 3 | 2 | 1 | O | N/A |
| 7. Quantity of Work: consistent in work productivity, shows initiative | 4 | 3 | 2 | 1 | O | N/A |
| 8. Reliability: accepts responsibility, follows safety, security, and/or sanitary procedures | 4 | 3 | 2 | 1 | O | N/A |

SPECIFIC VOLUNTEER TASKS:

- | | | | | | | |
|-----------|---|---|---|---|---|-----|
| 9. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 10. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 11. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 12. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 13. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 14. _____ | 4 | 3 | 2 | 1 | O | N/A |
| 15. _____ | 4 | 3 | 2 | 1 | O | N/A |

COMMENTS: _____

Signature of Community Service Teacher/Coordinator	Position	Date
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