

**PERFORMANCE EVALUATION - ASSISTANTSHIP**

Student: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Quarter: \_\_\_\_\_

1. Assigned Duties and Expectations (Due during 1<sup>st</sup> month of each quarter):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Attendance:     Excellent     Acceptable     Unacceptable

3. Performance:

Excellent                       Above average                       Average  
 Below average                       Unacceptable

Comments/Closure Statement (Student Accomplishment, Due @ end of each quarter):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Would you recommend continuation of assistantship beyond this quarter?

Yes                       No

5. Would you recommend continuation of assistantship beyond this academic year?

yes                       No

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_