STUDENT SELF EVALUATION OF JOB PERFORMANCE

Student ________________________________    Employer ________________________________

ID # __________ - __________ - __________    Employer/Address ________________________________

Major ___________________________ Code __________    Employer Code __________ __________

Quarter: F ______ W ______ SP ______ SU ______ Year ______ Code ______

Start Date ____________________________    End Date __________________________

THIS FORM SHOULD BE COMPLETED BY YOU DURING THE LAST WEEK OF YOUR CO-OP.

RETURN THIS FORM TO YOUR EMPLOYMENT ADVISOR IN THE ATTACHED ENVELOPE.

STUDENT JOB TITLE ________________________________

JOB RESPONSIBILITIES ________________________________

______________________________

Please evaluate your skills in the following areas:

<table>
<thead>
<tr>
<th>Skill</th>
<th>POOR</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Technical knowledge and skills</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Aptitude (ability to learn)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Productivity (amount of work)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>4. Quality of work</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>5. Attitude (response to job demands)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>6. Self-confidence</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
<tr>
<td>7. Problem solving (Reasoning)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>N/A</td>
</tr>
</tbody>
</table>

8. Were there technical skill problems? If so, please give examples:

NEVER | 1 | 2 | 3 | 4 | 5 | 6 | 7 | ALWAYS
9. Involvement with teamwork  
   | POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | NOT APPLICABLE | N/A |
10. Involvement with supervisor  
   | POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | NOT APPLICABLE | N/A |
11. Involvement with co-workers  
   | POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | NOT APPLICABLE | N/A |
12. Attendance  
   | POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | NOT APPLICABLE | N/A |
13. Punctuality  
   | POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | NOT APPLICABLE | N/A |

8. Were there personal/social problems?  
   | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |
   
   If so, please give examples: 

15. How often did your SUPERVISOR use the following to communicate with you?  
   | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |
   a. Speech  
   b. Sign  
   c. Writing  
   d. Professional Interpreter  
   e. TTY/Telephone  
   f. Demonstration (Hands On)  
   g. Electronic mail  

16. How often did YOU use the following to communicate with your supervisor?  
   | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |
   a. Speech  
   b. Sign  
   c. Writing  
   d. Professional Interpreter  
   e. TTY/Telephone  
   f. Demonstration (Hands On)  
   g. Electronic mail  

17. Communication during group meetings was handled by:  
   | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |
   a. Speech  
   b. Sign  
   c. Writing  
   d. Professional Interpreter  
   e. Minutes of meeting
18. How would you rate your reading skills as they relate to the job?  

| POOR | 1 | 2 | 3 | 4 | 5 | EXCELLENT | 6 | 7 | Not APPLICABLE | N/A |

19. How would you rate your writing skills as they relate to the job?  

| POOR | 1 | 2 | 3 | 4 | 5 | 6 | 7 | N/A |

20. Were there communication problems?  

| NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |

If so, please give examples: ____________________________________________

21. How often did you provide sign language instruction to improve communication with co-workers?  

| NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS | 6 | 7 |

22. Did you use the telephone on the job?  

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

23. Would a telephone normally be used by another person in the job?  

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

24. If you used the phone, what equipment or assistance was provided?  

_____ Telephone Amplifier _____ TTY or Relay Service _____ Interpreter _____ Interpreted by Co-workers

25. TRAINING

a. Did you receive formal orientation?  

Yes _____ No _____

b. Were you trained in specific job skills?  

Yes _____ No _____

If so, please give examples: ____________________________________________

2c. How many hours during the total co-op did you receive skills training?  

_____ Hours
26. Were you introduced to techniques or procedures on the job which you feel are new or specialized?
   Yes _____ No _____

   Please give examples: __________________________________________
   ____________________________________________________________

27. Are there other skill areas or more courses of study you might want to concentrate on for this particular job?
   Yes _____ No _____

   If so, please elaborate: _________________________________________
   ____________________________________________________________

28. Please evaluate your overall job performance:

   POOR  1  2  3  4  5  6  7  EXCELLENT

   ____________________________
   (Your Signature)

   ____________________________
   (Print your name)

   ____________________________
   Date: