



CAREER PROGRAMS

Work Experience Performance : EMPLOYER Evaluation
 (To be completed periodically ; please return upon completion)

1) **Student:** _____
 School: **Rockridge Secondary**
 Phone #: **604-981-1300**

2) **Company:** _____
 Phone #: _____

Program: _____
 Advisor: **P. Kashani**
 Fax #: **604-981-1301**

Supervisor: _____
 Fax #: _____

EMPLOYERS: Please evaluate this student as you would an **entry-level employee** in your work place.
This evaluation form will significantly influence the mark the student will receive for their work experience.

ENTRY-LEVEL EMPLOYABILITY SKILLS	ALWAYS (5)	USUALLY (4)	SOMETIMES (3)	SELDOM (2)	NOT (1)
student shows a positive attitude and is enthusiastic to learn and participate					
student shows a willingness to take initiative					
student is cooperative and works well with others					
student is honest and respects confidentiality					
student accepts constructive criticism and changes behaviour accordingly					
student is attentive, listens and follows directions					
student speaks clearly and audibly					
student asks appropriate questions, and can articulate thoughts or ideas					
student plans and organizes work in a timely manner					
student shows an ability to concentrate on the tasks assigned					
student is dressed and groomed appropriately for the job					
student abides by company's safety rules and regulations					
student makes a positive contribution to the workplace / community					

Please comment on the student's overall attitude and performance:

Overall Work Habit:

Excellent Good Fair Poor

Overall Grade:

A B C F

Number of days late: _____ Reason: _____

Number of days absent: _____ Reason: _____

Student's signature: _____ *Date :* _____

Supervisor's signature: _____ **Date :** _____

Would your company be willing to take a future Work Experience student? Yes No

Comments: _____