

SERVICE-LEARNING EVALUATION

TO BE COMPLETED BY PARTNER TO EVALUATE STUDENT PERFORMANCE (GROUP OR INDIVIDUAL)

Partner Organization: _____ Course: _____

Please give a brief description of the placement considered in this evaluation?

Did the placement meet the goals established in the placement contract? Why or Why not?

*Please use this portion to evaluate the quality of work produced by each student**

Student 1: _____ Total Hours Completed (CS&L Staff only): _____

	Excellent	Above Average	Average	Below Average	Unacceptable	Comments
Dependability						
Initiative						
Communication Skills						
Attitude						
Professionalism						
Achieved Placement Goals						

Student 2: _____ Total Hours Completed (CS&L Staff only): _____

	Excellent	Above Average	Average	Below Average	Unacceptable	Comments
Dependability						
Initiative						
Communication Skills						
Attitude						
Professionalism						
Achieved Placement Goals						

Student 3: _____ Total Hours Completed (CS&L Staff only): _____

	Excellent	Above Average	Average	Below Average	Unacceptable	Comments
Dependability						
Initiative						
Communication Skills						
Attitude						
Professionalism						
Achieved Placement Goals						

Student 4: _____

Total Hours Completed (CS&L Staff only): _____

	Excellent	Above Average	Average	Below Average	Unacceptable	Comments
Dependability						
Initiative						
Communication Skills						
Attitude						
Professionalism						
Achieved Placement Goals						

Student 5: _____

Total Hours Completed (CS&L Staff only): _____

	Excellent	Above Average	Average	Below Average	Unacceptable	Comments
Dependability						
Initiative						
Communication Skills						
Attitude						
Professionalism						
Achieved Placement Goals						

(*If additional evaluation is needed for more students, the CS&L has supplemental sheets available)

Please use this portion to evaluate the performance of overall group (if applicable).

Please rate the students by checking the appropriate boxes.	Strongly Agree	Agree	Disagree	Strongly Disagree
Cooperation: Students in this group worked well together to complete the placement.				
Communication: The group communicated with my organization and each other effectively.				
Commitment: The group was committed to the placement and did what was asked of them.				
Dependability: The group was reliable and I could count on them to do what was asked of them.				
Professionalism: Students in this group behaved appropriately and were professional.				
Attitude: This group demonstrated a positive attitude towards the placement.				
Placement Outcome: The placement was completed successfully and had a positive outcome.				

Please share any thoughts you have about the impact of this placement?

By signing below, I am confirming that I supervised students in this placement and my interaction with them was sufficient to accurately complete this evaluation to the best of my knowledge.

Supervisor Signature: _____

Printed Name: _____ Title: _____

Date: _____ Phone: _____ Email: _____

Please return this form by the due date to: Alexis McMillen, Program Coordinator

Hand-deliver: 3rd Floor, Student Services Building

Email: ServeandLearn@mail.wvu.edu