

Cooperative Education Program

EMPLOYER EVALUATION OF STUDENT WORK

Employer: Please complete this form and forward to the Co-op Education Advisor, James Werner, at: jpwerner@calpoly.edu or fax to (805) 756-6321.

Student Name:

Date:

Employer Name:

Employer Phone:

Supervisor Name:

Supervisor Email:

Please check one:

- Mid-Term** (at the end of the 5th week of work assignment)
- FINAL** (final assessment of work assignment)

Performance Criteria: Please evaluate the quality of the student's performance to date.	Exceeds Expectations	Meets Expectations	Requires Improvement	N/A
<i>1. Attendance and punctuality</i>				
<i>2. Reliability and dependability</i>				
<i>3. Professionalism (attitude, maturity, appearance)</i>				
<i>4. Collaborates well with others (PLO 5)</i>				
<i>5. Eager to complete assignments and establish a creative practice (PLO 2)</i>				
<i>6. Resolves problems and thinks innovatively (PLO 6)</i>				
<i>7. Knowledge of the art and/or design field, ability to learn (PLO 3)</i>				
<i>8. Produces a strong body of work (PLO 1)</i>				
<i>9. Improvement over the course of the internship</i>				

(PLO = Program Learning Objectives for Art & Design, located at <http://www.artdesign.calpoly.edu>)

Please provide additional comments, if necessary, use a separate page.

Supervisor Signature: _____