## **EVALUATION OF UNDERGRADUATE ASSISTANT**

## SOUTHERN ILLINOIS UNIVERSITY CARBONDALE

(Submit to Scholarship Coordinator, Center for Undergraduate Research & Creative Activities, Student Services Building, Room 126, Mailcode 4730)

Name: Last	First	Middle	HRMS ID
Department (Organization)	Position Title		
	Rating (select one)	Comments	
Quality of work			
Completion of assignments			
Ability to perform on a paraprofessional level			
Ability to work with supervisor and other staff			
Knowledge and abilities in major field			
Problem-solving skills			
Communication skills			
Ability to learn from the Undergraduate Assistant experience			
Overall rating			
ADDITIONAL COMMENTS:			
NOTE TO SUPERVISORS: For all "Needs Improv	rement" and "Unsatisfactory" work ra	tings, please specify action the	nat is required by the undergraduate
assistant to improve work performance.	·		, ,
	Signature of Supervisor		Date
	Signature of Dean/Director	•	 Date
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	Signature of Student		Date