



## Student Volunteer Assessment Form (To be completed by Site Supervisor)

Center for Service Learning  
Western Carolina University

Please submit the completed form to the Center for Service Learning, Western Carolina University, 273 Belk, Cullowhee, NC 28723. Questions? Please call the Director of Service Learning at (828) 227-7184.

**Directions for Students:** Please complete all requested information in this box.

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Agency \_\_\_\_\_  
 Supervisor \_\_\_\_\_ Dates of Service: from \_\_\_\_ to \_\_\_\_  
 Supervisor's Title \_\_\_\_\_  
 Supervisor's Telephone Number(s) \_\_\_\_\_

### Directions for Supervisor

Please check the box that best rates this student's performance in terms of the following qualities:

	5 Excellent	4	3 Satisfactory	2	1 Poor
Ability to work with minimal supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Following directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Relationship with clients

     

Sense of responsibility

     

Interest

     

Good judgment

     

Willingness to learn

     

**Supervisor's Comments:**

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return to:  
Center for Service Learning  
273 Belk  
Western Carolina University**