

HASKAYNE SCHOOL OF BUSINESS
Bachelor of Commerce Co-operative Education Program

CO-OP PERFORMANCE EVALUATION (CONFIDENTIAL)

Student Name:	Company Name:
Student I.D.#:	Supervisor's Name
Concentration:	Supervisor's Title:
Work term: 1 2 3	Time Period Covered:

Supervisor: Please complete the evaluation and review the information with the student.

Student: Please submit this form by the end of each 4-month term.

Email to Louise Grunerud: louise.grunerud@haskayne.ucalgary.ca

Subject Line: Last name, First name, Performance Evaluation

Skill Levels (Depending on position, some skills may be more relevant than others)

		1_Far short of expectations	2_Short of expectations	3_Meets expectations	4_Exceeds expectations	5_Far exceeds expectations	N/A Not Applicable
Communication	Confident, Friendly and engaging <i>Comments:</i>						
	Effectively uses body language, voice tone, pace and volume <i>Comments:</i>						
	Writes clearly and concisely <i>Comments:</i>						
	Produces high quality, error-free emails and documents <i>Comments:</i>						
Analytical	Identifies and summarizes the problem at issue <i>Comments:</i>						
	Evaluates data validity; distinguishes between fact and opinion <i>Comments:</i>						
	Conclusions follow logically from analysis <i>Comments:</i>						
	Creates value through strategic thinking <i>Comments:</i>						
Personal Leadership	Punctual; calls in and maintains agreed hours <i>Comments:</i>						
	Willing to speak up, communicate information and ask for clarification <i>Comments:</i>						
	Develops and adheres to a calendar or checklist of priorities <i>Comments:</i>						
	Listens to feedback and acts to improve, is flexible and adapts to change <i>Comments:</i>						
Teamwork	Makes a positive impact on the team by forming rapport and credibility <i>Comments:</i>						
	Shares information and resources openly with others <i>Comments:</i>						
	Pitches in to help co-workers, is willing to put in extra time and effort <i>Comments:</i>						

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act and the Universities Act. It is required for evaluation of the student's performance while on Co-operative Education placement. The information will form part of the student's record. The information provided on this form could also be used for statistical analysis. If you have any questions about the collection or use of this information, please contact the Career Centre at (403) 220-7533.

		1	2	3	4	5	N/A
Initiative	Seeks opportunities to learn, never sits idle when work is completed <i>Comments:</i>						
	Resourceful and proactive when gathering information <i>Comments:</i>						
	Self-motivated; takes initiative to complete work despite obstacles <i>Comments:</i>						
	Resolves problems within adequate time frames <i>Comments:</i>						
Technical	Has technical skills required for the position <i>Comments:</i>						
	Is willing to enhance technical skills <i>Comments:</i>						
	Uses technology to perform work efficiently <i>Comments:</i>						

Overall Level of Satisfaction <input type="radio"/> Excellent <input type="radio"/> Very Good <input type="radio"/> Good <input type="radio"/> Fair <input type="radio"/> Poor	
If given the opportunity, I would hire the student in a future, full time role? Yes <input type="checkbox"/> No <input type="checkbox"/> I have discussed this evaluation with the student? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Major Strengths 1. 2.	Comments
Areas for improvement 1. 2.	

Supervisor's Signature

Date

Student's Comments Were your personal expectations for growth and development during this work experience: <input type="checkbox"/> Accomplished <input type="checkbox"/> Somewhat accomplished <input type="checkbox"/> Not accomplished	Other Comments
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Student's Signature

Date