

**Rowan-Cabarrus Community College
Cooperative Education
P.O. Box 1595
Salisbury, NC 28145-1595
Employer Final Evaluation of Co-op Student**

Name of Student: _____ Major: _____

To be completed by co-op employer/supervisor.

Please evaluate the student objectively, comparing him or her with other students of comparable academic work or with other personnel assigned to the same or similar classified positions. The completed form can be mailed to the Office of Work-based Learning/Co-op or faxed to (704) 639-0702.

Evaluation Criteria	Exceptional	Very Good	Average	Marginal	Not Applicable	Comments
Relation with others						
Judgment						
Ability to Learn						
Communication skills						
Technical skills						
Teamwork						
Dependability						
Quality of work						
Quantity of work						
Potential for greater responsibility						
Educational preparation for assignment						

Attendance: Regular Irregular

Punctuality: Regular Irregular

Comments: _____

Please circle a letter grade in relation to the student's performance:

A Excellent 44-50 points	B Very Good 37-43 points	C Average 30-36 points	D Below Average 23-29 points	F Unsatisfactory 0-22 points
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Signature for Co-op Site Supervisor _____ Date _____