## **Mid-Term Evaluation – Employer**



Please submit this form to: Anne Torwesten, Co-operative Education & Placement Officer anne.torwesten@flemingcollege.ca, T: (705) 324-9144 X 3030 Toll-Free: 1-866-353-6464

## Student Name: \_\_\_\_\_

Company Name: \_\_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

This form is used to evaluate the student's performance, and we ask that you discuss it with the student so they can improve upon their skills in the second half of the co-op work term. The Employer Evaluation must be completed by the student's immediate supervisor. **This evaluation will be forwarded to the student and the Program Coordinator for reflection on their performance.** Fleming College requires this evaluation in order to ensure our co-op student's applied learning is in good standing.

## Please assess the student in each of the following areas by checking ( $\checkmark$ ) the box which best describes his/her performance:

| Attitude &  | Little interest, poor<br>attitude, waits to be told<br>what to do next |   |   | Average amount of interest and<br>enthusiasm for tasks assigned |   |        |  | High interest in job,<br>very enthusiastic, self-<br>starter, looks for work to do |        |         |     |
|-------------|--|---|---|---|---|--------|--|--|--------|---------|-----|
| Initiative  | 1<br>□   | 2<br>□  | 3<br>□  | 4<br>□  | 5 | 6<br>□ | 7<br>□   | 8  | 9<br>□ | 10      | N/A |
| Knowledge & | Very little relevant knowledge, requires extensive training            |   |   | Average amount of knowledge<br>for an entry level position      |   |        |  | Excellent knowledge & skills,<br>requires minimal training                         |        |         |     |
| Skills      | 1<br>□   | 2<br>□  | 3<br>□  | 4<br>□  | 5 | 6<br>□ | 7<br>□   | 8  | 9<br>□ | 10      | N/A |
|             |  | Never wears required safety Occasionally reminded to equipment, exhibits wear safety equipment, and |   |   |   |        |  | Exhibits safe work habits, and   |        |         |     |
| _           | danger   | ous work h  | abits   |   |   |        |  | always uses required safety gear   |        |         |     |
| Safety      |  | 2<br>□  | 3   | 4<br>□  | 5 | 6<br>□ | 7<br>□   | 8  | 9<br>□ | 10      | N/A |
| Quality of  | Fails to organize work<br>effectively, many errors                     |   | Usually organized, work has normal amount of errors |   |   |        | Very thorough in performing work, with very few errors |  |        |         |     |
| Work        | 1<br>□   | 2<br>□  | 3<br>□  | 4<br>□  | 5 | 6<br>□ | 7  | 8  | 9<br>□ | 10<br>□ | N/A |
| Quantity of | Very low in comparison to other trainees                               |   |   | Average amount of productivity for a trainee                    |   |        |  | Highly productive in<br>comparison to other trainees                               |        |         |     |
| Work        | 1<br>□   | 2   | 3<br>□  | 4<br>□  | 5 | 6<br>□ | 7<br>□   | 8  | 9<br>□ | 10      | N/A |
|             | Jumps to conclusions without sufficient knowledge                      |   |   | Judgment usually good in routine situations                     |   |        |  | Decisions based on thorough<br>analysis of problems                                |        |         |     |
| Judgment    | 1  | 2<br>□  | 3<br>□  | 4<br>□  | 5 | 6<br>□ | 7<br>□   | 8  | 9      | 10      | N/A |

| <b>Relations</b> with          | Does not work well with others, often causes friction |        |         | Usually works well with others<br>under normal circumstances |   |        |             | Always works well with others,<br>excellent team member   |        |         |     |
|--------------------------------|---|--------|---------|--|---|--------|-------------|---|--------|---------|-----|
| Co-workers                     |   | 2<br>□ | 3<br>□  | 4<br>□   | 5 | 6<br>□ | 7<br>□      | 8   | 9<br>□ | 10      | N/A |
| Acceptance of<br>Criticism and | Resents criticism and suggestions by supervisor       |        |         | Accepts criticism and suggestions                            |   |        |             | Makes prompt improvements<br>based on criticism           |        |         |     |
| Suggestions                    | 1   | 2<br>□ | 3       | 4  | 5 | 6      | 7           | 8   | 9      | 10      | N/A |
| Written                        | Needs<br>Improvement                                  |        |         | Usually clear<br>and concise                                 |   |        |             | Always clear, well organized,<br>readable with few errors |        |         |     |
| Communication                  | 1   | 2<br>□ | 3<br>□  | 4<br>□   | 5 | 6<br>□ | 7           | 8   | 9<br>□ | 10<br>□ | N/A |
| Verbal                         | Needs Improvement                                     |        | Average |  |   |        | Excellent   |   |        |         |     |
| Communication                  | 1<br>□  | 2<br>□ | 3<br>□  | 4<br>□   | 5 | 6<br>□ | 7<br>□      | 8   | 9<br>□ | 10      | N/A |
| Punctuality &                  | Always late for work,<br>unreliable, regularly absent |        |         | Usually on time, occasionally<br>has unexcused absences      |   |        |             | Always on time, only absent for legitimate reasons        |        |         |     |
| Attendance                     | 1<br>□  | 2<br>□ | 3<br>□  | 4<br>□   | 5 | 6<br>□ | 7<br>□      | 8   | 9<br>□ | 10      | N/A |
| Overall                        | Unsatisfactory  |        | Margir  | Marginal Very good   |   |        | Outstanding |   |        |         |     |
| Performance                    | 1   | 2<br>□ | 3       | 4  | 5 | 6      | 7           | 8   | 9<br>□ | 10      | N/A |

Briefly describe the student's strengths, and areas for improvement. This feedback will provide encouragement as well as goal setting for them as they complete the final half of their placement:

## Strengths:

| 1                        |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|
| 2                        |  |  |  |  |  |  |
| 3                        |  |  |  |  |  |  |
| Areas for Improvement:   |  |  |  |  |  |  |
| Areas for Improvement:   |  |  |  |  |  |  |
| Areas for Improvement: 1 |  |  |  |  |  |  |

Comments and Recommendations (please use an additional sheet if necessary):

3. \_\_\_\_\_