

Julian Charter School

Work Experience Evaluation Form

Julian Charter School 1704 Cape Horn/PO Box 2470 Julian, CA 92036 760-765-3847 fax 760-765-3849

Work Experience Evaluation For

For School use: 1 st evaluation Date:	2 nd ev	aluation
Student:		Employer:
Job Title:		Evaluation:
Employee job description:		
Your student employee is eligible f	or high so	chool CREDIT and a GRADE for the time worked at your
		nd other requirements are met, they will receive a grade
based largely on your evaluation.	Please cir	cle the appropriate numbers below and return/mail/fax the
form ASAP. You will be sent two	of these e	valuations each semester (fall-winter/spring). If you have
any questions regarding this evalua	ition, plea	se call 619-772-7743 and ask to speak with the .Counselor.
1=Excellent 2=Above Average	3=Ave	rage 4=Poor
Is punctual 1 2	2 1	Is often late
Is organized 1 2		Is unorganized
Seldom absent 1 2		Frequently absent
Is cooperative 1 2		Is uncooperative
Appropriate attire 1 2		Inappropriate attire
Shows good judgment 1 2		Shows poor judgment
Tries hard to learn 1 2		Lacks initiative
Needs little supervision 1 2		Needs frequent supervision
Works well under pressure 1 2		Works poorly under pressure
Good total job performance 1 2		Poor total job performance
Makes favorable impression 1 2		Makes unfavorable impression
Meets production standards 1 2		work is poor quality (inaccurate)
production standards 1 2		(mattalian)
1. Student employees success	es:	
2. Student employee should improve in:		
3. Job skills or education needed to gain in or improve in:		
	_	ou would hire full time?:
5. Additional comments:	•	
Evaluator's signature:		Date:

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Please return by:	Thank you!