

THE UNIVERSITY OF GEORGIA Office of Student Financial Aid

www.uga.edu/osfa

Form FWS111

Return Completed Form To:

Office of Student Financial Aid 220 Holmes/Hunter Academic Building Athens, Georgia 30602-6114 Fax: (706) 542-8217

Federal Work-Study Student Employee Evaluation

			81		
Student's Full Name	Student's UGA ID Number				
Supervisor's Name	Liaison's N	ame			
Department	Date				
	1 = Needs Improvement		3 = Satisfactory 5 = Excellent		
Adheres to set schedule	1 🔾	2 🔾	3 🔾	4 🔾	5 🔾
Arrives at work on time	1 🔾	2 🔾	3 🔾	4 🔾	5 🔾
Contacts supervisor if running late or unable to work	1 (2 🔾	3 🔾	4 🔾	5 🔾
Pays attention to details	1 (2 🔾	3 🔾	4 🔾	5 🔾
Notices what needs to be done and does it without being asked	1 (2 🔾	3 🔾	4 🔾	5 🔾
Listens carefully to instruction	1 (2 🔾	3 🔾	4 🔾	5 🔾
Maintains positive, helpful attitude	1 (2 🔾	3 🔾	4 🔾	5 🔾
Neat appearance/appropriate attire	1 (2 🔾	3 🔾	4 🔾	5 🔾
Would you re-employ this student through the FWS program? $ {f Y} $	es 〇 N	o ()			
Supervisor's Comments					
Supervisor's Comments					
Supervisor's Signature	Date				
Student's Response/Comments					
Student's Signature			<u></u>		