The role of a Graduate Assistant is to assist faculty with work requiring a high level of knowledge, skills, and capabilities. It’s also an opportunity for them to gain new learning, skills, and abilities as they assist you with your work. As such, we’re requesting that GA supervisors complete a short evaluation on their GA before at the end of their appointment.

**SUPERVISOR INFORMATION**

Evaluation completed by: (print) ___________________________ Today’s Date ___________________________

Graduate Assistant’s Name ___________________________ Phone ___________________________

Assignment Period: [ ] FALL [ ] WINTER [ ] SPRING [ ] SUMMER

Skills a student may have or learn during this GA assignment include: Written Communication Skills; Work Ethic; Oral/written Communication Skills; Organization/Planning Skills; Initiative; Listening Skills; Interpersonal Skills; Computer Skills; Analytical/Quantitative Skills; Presentation Skills; Problem-Solving; Research Skills; Social media tools; Team work.

Attendance: Rate your GA’s availability to meet with you per the agreed upon work schedule; and give you updates.

[ ] Above Average  [ ] Average (acceptable w/ excused absences)  [ ] Below Average (frequently changed days; missing updates)

Communication: Rate your graduate assistant’s proficiency in oral/written communication skills; interpersonal skills; use of social media tools (if needed).

[ ] Above average  [ ] Average  [ ] Below Average  Comment: ___________________________

Performance of assignments: Rate your graduate assistant’s attention to detail and completion of assignments using listening skills, organization/planning skills; research skills (if needed); computer skills with programs needed; initiative.

[ ] Above average  [ ] Average  [ ] Below Average  Comment: ___________________________

Overall Performance: Using the rating scale below, how well did your graduate assistant perform overall on this GA appointment? (with 5 = Excellent and 1 = Needs Improvement)

5 4 3 2 1

Would you rehire this graduate assistant if the opportunity came up in the future?  [ ] Yes  [ ] No

If “no,” please tell us the challenges you were having with your GA so we can coach him/her to improve in this area.

__________________________________________________________

Evaluator’s Signature  ___________________________ Date ___________________________

Thank you for your time in completing this evaluation! Please submit this form to Lisa Peña at lisa.pena@csusb.edu, or to JB-461.