**End of the Semester Graduate Assistant Evaluation Form**

**Graduate Assistant’s Name: R#:**

**Faculty Supervisor’s Name(s): Academic Semester of Evaluation:**

***COMPLETED BY STUDENT THEN SENT TO FACULTY SUPERVISOR***

**Accomplishments during the recently completed semester** *(add details below each of the bullet points below)***:**

* Teaching\* (TA roles, guest lectures, informal advising, mentoring)
* Research/Creative Activity (journal articles, papers, posters, presentations, grantsmanship, honors)
* Service (department, college, university, profession)
* Professional Development (workshops, webinars)
* Professional Memberships
* Other items

*\*Ph.D. Students – If you had a Peer Teaching Evaluation completed during the previous semester, please attach the feedback to this form.*

**Summary of graduate assistant’s responsibilities/duties during the recently completed semester. Provide brief reflection on how well the established goals were reached (or not):**

***COMPLETED BY FACULTY SUPERVISOR THEN DISCUSSED WITH STUDENT***

**Comments regarding the student’s responsibilities, progress, goals, and performance:**

**Overall Performance Rating Assigned (Circle One):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Exceeds Expectations** | **Above Average Expectations** | **Meets Expectations** | **Minimally Achieves Expectations** | **Below Performance Standards** |

**Would you recommend this student for reappointment as a graduate assistant next semester? (circle one)**

|  |  |
| --- | --- |
| **Yes** | **No** |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Graduate Assistant Signature Date**