

Old Colony Regional Vocational Technical High School District

476 North Avenue
Rochester, MA 02770-1899

Telephone: (508) 763-8011 - Fax: (508) 763-9821 - Email =

Cooperative Education Program Student Evaluation Form

Student Name: Shop: _____

To the Employer: Complete Yellow High Lighted Sections in this form at the end of each two week co-op cycle. Email completed form to the Shop Instructor. Thank You.

Daily Hours Worked													
Month											Year	2013 / 2014	
	1	2	3	4	5	Week's Totals	6	7	8	9	10	Week's Totals	
Week's Dates													
Daily Hours Worked													

Please evaluate the trainee by placing a **number** in the box that best describes their job performance.
Please use the following grade scale of 1-4 for each characteristic.

4	Excellent	Total Score to grade: <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 15%;">43-44</td> <td style="width: 15%;">A+</td> <td style="width: 15%;">36-37</td> <td style="width: 15%;">B+</td> <td style="width: 15%;">25-29</td> <td style="width: 15%;">C+</td> <td style="width: 15%;">11-18</td> <td style="width: 15%;">D</td> </tr> <tr> <td>41-42</td> <td>A</td> <td>33-35</td> <td>B</td> <td>22-24</td> <td>C</td> <td>10 or below</td> <td>F</td> </tr> <tr> <td>38-40</td> <td>A-</td> <td>30-32</td> <td>B-</td> <td>19-21</td> <td>C-</td> <td></td> <td></td> </tr> </table>	43-44	A+	36-37	B+	25-29	C+	11-18	D	41-42	A	33-35	B	22-24	C	10 or below	F	38-40	A-	30-32	B-	19-21	C-			Cycle Grade
43-44	A+		36-37	B+	25-29	C+	11-18	D																			
41-42	A		33-35	B	22-24	C	10 or below	F																			
38-40	A-		30-32	B-	19-21	C-																					
3	Good																										
2	Fair																										
1	Poor																										

Characteristics	Score (1-4)
ACCURACY OF WORK	
CARE OF WORKING AREA	
USE OF MATERIAL & EQUIPMENT	
ATTITUDES TOWARD WORK	
SPEED IN PERFORMING DUTIES	

Characteristics	Score (1-4)
JOB LEARNING AND APPLICATION	
RESPONSIBILITY	
INITIATIVE	
ATTITUDE TOWARDS CO-WORKERS	
ATTITUDE TOWARDS SUPERVISORS	
PERSONAL APPEARANCE	

Additional Comments: _____

Signature: _____ Position: _____ Date: _____