

LEEWARD COMMUNITY COLLEGE
STUDENT PROGRESS REPORT

Name: _____
Last Name, First Name

Fall Spring SS

Dept/Division/Unit: _____

Job Title: _____ Job No.: _____ Range/Step: _____

Brief Description of Duties:

Please rate the student employee in the following areas:

	Exceeds	Meets	Needs Improvement
Ability to work with minimum supervision	X	X	X
Attitude	X	X	X
Efficiency	X	X	X
Initiative	X	X	X
Punctuality	X	X	X
Responsibility	X	X	X
Communication	X	X	X
Ability to work with others	X	X	X
Overall rating	X	X	X

Comments (Optional with the exception of "Needs Improvement"):

By signing below, the supervisor and student employee certify that they have discussed this progress report.

Supervisor *Date*

Student Employee *Date*