



GOGEBIC-ONTONAGON INTERMEDIATE SCHOOL DISTRICT WORK BASED LEARNING EVALUATION

Student: _____ Date of Evaluation: _____

Work Site: _____

Please complete the evaluation. List all primary job duties and assignments which demonstrate and support skill attainment. This must be reviewed every 30 calendar days.

The student.....	Always, Every time (4)	Usually, Almost Always (3)	Sometimes, Acceptable (2)	Seldom (1)	Never (0)	N/A
1. Is motivated to work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Follows work based learning site safety rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Follows all work based learning site policies and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Dress appropriately for work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is able to complete one-step tasks in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is able to complete two or more step tasks in a timely manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Brings appropriate problems to the attention of his/her supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Accepts help/directions from supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Is able to cooperatively work with co-workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Remains in assigned location until tasks are completed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Finds other tasks on own when finished with first task.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Talks appropriately while at the work based learning site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Has enough energy to complete all assigned tasks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Job Site Duties:

-
-
-
-

Total: _____

Note to Site Supervisor: The rating sheet above is an important part of the student's work based learning. Please be fair in your rating. Do not rate too high thinking that you are doing the student a favor. If the student needs improvement, rate accordingly so that we may help him/her. Your cooperation is greatly appreciated.

Level of Supervision Needed: Please circle the level of supervision this student needs on the job site:

- 1) independent 2) some redirection 3) frequent verbal prompts 4) close supervision 5) one-to-one assistance

Comment:

Work Site Supervisor Signature _____ Date _____

Student Signature _____ Date _____

Teacher/Facilitator Signature _____ Date _____

Total Points: _____

Average Score: _____

Distribution:

School File

Parent

GOISD

Worksite