



SAINT JOSEPH'S COLLEGE

This evaluation form is to be filled out by student who has completed a community-based project.

Student name (optional) _____ **Course or program name** _____

Faculty member _____ **Community partner** _____

Direct supervisor _____ **Date** _____

Please use the following rating scale for your answers and add any comments below.

Strongly agree	Agree	Disagree	Strongly disagree	Not Applicable
1	2	3	4	N/A

_____ 1. The partner provided an adequate position description, orientation/training, and assistance.

Comments?

_____ 2. The partner provided supervision and feedback on your performance.

Comments?

_____ 3. The partner provided a safe and appropriate working environment.

Comments?

_____ 4. The partner provided the technical assistance necessary to support the project.

Comments?

_____ 5. The partner communicated with you in a timely and appropriate manner.

Comments?

_____ 6. The partner met with you at appropriate intervals and discussed concerns and specific plans for completion.

Comments?

Please answer the following open-ended question on a separate paper or the back of this form:

7. How did this experience contribute to your academic and/or personal growth?

Instructions to student: Please fill out and return to faculty member.

Instructions to faculty member: Once you have collected from all students, please send copies to Kimberly Post, Office of Community-Based Learning.