

**GUAM COMMUNITY COLLEGE**  
**WORK EXPERIENCE PROGRAM**  
**RATING SHEET**

STUDENT: 201106977

CTE PROGRAM:

TRAINING SITE: DUSITTHANI

POSITION: WE Trainee

EVALUATION IS GIVEN UPON COMPLETION OF **EVERY 90 HOURS**.

BEGINNING DATE: 9/21/18-9/23/18 ENDING DATE: 12/19/18-1/12/19 EVALUATOR: Kimberly Degan

|   |   |                  |                 |
|---|---|------------------|-----------------|
| Please <input checked="" type="checkbox"/> Training Block | First 90 hours: <input checked="" type="checkbox"/> | Second 90 hours: | Third 90 hours: |
|---|---|------------------|-----------------|

EMPLOYER'S EVALUATION OF STUDENT'S ON-THE-JOB TRAINING:  
(Your input enables us to provide better instruction and counseling for the student.)

Please rate the following factors as:

(0) Not Applicable (1) Poor (2) Fair (3) Average (4) Good (5) Excellent

|                        |                    |                                |                    |
|------------------------|--------------------|--------------------------------|--------------------|
|                        |                    | POSITIVE ATTITUDE & ENTHUSIASM | 0 1 2 3 4 <u>5</u> |
| PERSONAL APPEARANCE    | 0 1 2 3 4 <u>5</u> | COMMUNICATIONS                 | 0 1 2 3 4 <u>5</u> |
| COURTESY & RESPECTFUL  | 0 1 2 3 4 <u>5</u> | INITIATIVE                     | 0 1 2 3 4 <u>5</u> |
| FOLLOWS INSTRUCTIONS   | 0 1 2 3 4 <u>5</u> | PRODUCTIVITY                   | 0 1 2 3 4 <u>5</u> |
| JOB QUALITY & ACCURACY | 0 1 2 3 4 <u>5</u> | TIME MANAGEMENT/ATTENDANCE     | 0 1 2 3 4 <u>5</u> |
| DEPENDABILITY          | 0 1 2 3 4 <u>5</u> |                                |                    |

UNEXCUSED ABSENCE: 0 EXCUSED ABSENCE: 0 TIMES LATE TO WORK: 0 # OF HRS WORKED 45

Student's Strengths: Student has so much potential, would love to have her as employee. Great job!

Student's Areas for Improvement: None, overall student is dependable!

Percentage grade you award this student is 100 %

1/10/19  
DATE

Revised Aug 2014

[Signature]  
TRAINEE'S SIGNATURE

[Signature]  
Kimberly Degan Banquet Manager  
EVALUATOR'S SIGNATURE (Print Name & Title)