

EVALUATION OF STUDENT BY AGENCY

_____ is a student volunteering at your agency as part of a service-learning project. Thank you for your partnership in service-learning. Please evaluate the student and return this evaluation form to:

Instructor Fills Out this Portion:

Instructor: _____

Address: _____

Course or Program: _____

DUE DATE: _____ Service Hours Required: _____

Service-Learning Site Supervisor Fills Out this Portion:

Please evaluate the student and return this form to the instructor (by mail or via the student) by the due date marked above. Thank you for your help with service-learning.

I. How many hours has the student served this term? _____

II. What service did the student provide?

III. Please briefly evaluate the student's performance (strengths and areas for improvement):

Supervisor Signature: _____ Date: _____

Agency (please print): _____

**For information, please contact the faculty member above,
or contact Volunteer Insights at info@volunteerinsights.org**