



*California State University, Long Beach*  
**DEPARTMENTAL STUDENT PERFORMANCE REPORT**

**Section A – Student Assistant Information**

Department ID and Work Location		PeopleSoft Employee ID#	Name of Student (Last, First, MI)	
From: _____	To: _____	Job Title	Range	Rate
Period of Evaluation				
Effective Pay Period	New Job Title	New Range	New Rate	

Brief Description of Duties:

**Section B – Performance Evaluation**

*Student employees may be considered for a merit salary increase of no more than 5% maximum after an Academic Year or 500 hours of satisfactory service, whichever occurs first. Cumulative service may be considered in more than one position if the student is working within the same department and doing the same work. Requests for hourly rate increases that fall under Classification Level IV must be approved by the Administrative Services Manager.*

- 500 hours of satisfactory service                       Academic Year

Evaluate each of the criterions and mark the appropriate box for the number corresponding to the following rating scale. Ratings of 1 or 2 must include an explanation in Section C.

	1 - Unacceptable	2 – Improvement Needed	3 – Satisfactory	4 – Above Average	5 – Outstanding
<b>WORK HABITS:</b> Organization of work, care of equipment, safety, punctuality, attendance.	1 - <input type="checkbox"/>	2 -	3 -	4 -	5 -
<b>ATTITUDE:</b> Enthusiasm for work, willingness to conform to job requirements and to accept suggestions for work improvement.	1 - <input type="checkbox"/>	2 -	3 - <input type="checkbox"/>	4 -	5 - <input type="checkbox"/>
<b>QUALITY OF WORK:</b> Accuracy, precision, completeness, neatness.	1 -	2 -	3 -	4 -	5 -
<b>QUANTITY OF WORK:</b> Amount of acceptable work produced.	1 -	2 -	3 -	4 -	5 -
<b>PUBLIC RELATION SKILLS:</b> Ability to work effectively with students, coworkers and public.	1 -	2 -	3 -	4 -	5 -
<b>INITIATIVE:</b> Self-reliance, resourcefulness, willingness to accept and carry out responsibilities.	1 -	2 -	3 -	4 -	5 -
<b>DEPENDABILITY:</b> Degree to which employees can be relied upon to do the job and to meet deadlines without close supervision.	1 -	2 -	3 -	4 -	5 -

**Section C – Additional Comments** (use other side if necessary)

Reviewing Supervisor's Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Appropriate Administrator Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

**Section D – Student's Signature (required)**

This report has been explained to me and I understand the contents. I also understand that my signature does not necessarily indicate my agreement/concurrence with the above report.

By checking this box, I authorize the release of this information to future employers for reference purposes.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_