

**WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA)  
 YOUTH WORK EXPERIENCE PROGRAM  
 PARTICIPANT WORK EXPERIENCE EVALUATION FORM**

Please submit monthly Participant Work Experience Evaluations on skills progress. Submit evaluations directly to the Youth Program Contractor via fax or email. Failure to submit monthly evaluations will result in participant’s removal from work experience site.

Please complete the following evaluation using the below scale to rate the progress of student performance:

\_\_\_\_\_

Participant Name (Please Print)

\_\_\_\_\_

Worksite Supervisor (Please Print)

<b>Performance Evaluation: Part A</b>	<b>Poor</b>	<b>Fair</b>	<b>Good</b>	<b>Excellent</b>	<b>Outstanding</b>
Attendance (punctuality)					
Productivity (volume, promptness)					
Quality of Work (accuracy, completeness, neatness)					
Initiative (self-starter, resourceful)					
Dependability (thorough, organized)					
Attitude (enthusiasm, curiosity, desire to learn)					
Interpersonal Relations (cooperative, courteous, friendly)					
Ability to Learn (comprehension of new concepts)					
Communication Skills (written and oral expression)					
Judgment (decision making)					
Overall Performance					

<b>Performance Evaluation: Part B</b>	<b>Poor</b>	<b>Fair</b>	<b>Good</b>	<b>Excellent</b>	<b>Outstanding</b>
Job-Specific Functions Completed by Youth Program Contractor):					
1					
2					
3					
4					
5					

Comments:

\_\_\_\_\_  
 Worksite Supervisor Signature Date

\_\_\_\_\_  
 Participant Signature Date

**NOTE:** This form is to be completed by worksite supervisor and maintained in the participant physical file by the Youth Program Contractor.