



*The Florida State University
Graduate Assistant Performance
Evaluation*

Evaluation term/year: _____

Employee's Name: _____

Supervisor's Name: _____

Summary of Duties: () Teaching () Research () Other: _____

Work Performance:

Satisfactory

Official concern

*If official concern is cited, options for remediation must be communicated in writing as an addendum to this form. A copy of this form with addendum should be forwarded to the Dean of the Graduate School who will then forward the documents to the appropriate person in Human Resources.

COMMENTS:

*Written comments are helpful for the student, even if performance is satisfactory.

Supervisor Signature: _____ Date: _____

Employee Signature: _____ Date: _____

*Has this evaluation been discussed with the employee? () Yes () No (attach explanation).