

## Graduate Assistant (GA) and Graduate Research Assistant (GRA) Evaluation Form

Graduate Assistants and Graduate Research Assistants must be evaluated at least once each academic year of appointment.

College/Department \_\_\_\_\_

GA or GRA Student Name \_\_\_\_\_

Semester/Year of Evaluation \_\_\_\_\_

Description of Assignment(s): \_\_\_\_\_

Rate the GA or GRA on each of the following criteria using a scale of 0 – 10 (0 = lowest, 5=average, 10=highest).

Criterion	Score	Suggestions for Improvement (if needed)
Punctuality		
Reliability		
Quality of accomplishment of assigned activities		
Initiative		
Productive communication		

**Overall Assessment of Effectiveness:**      **Excellent**                      **Satisfactory**                      **Unsatisfactory**

Comments

Action Plan to Address Deficiencies (if needed)

\_\_\_\_\_  
Signature of Rater

\_\_\_\_\_  
Printed Name of Rater

\_\_\_\_\_  
Date of Review with Student

\_\_\_\_\_  
Signature of Student

*I acknowledge that I have read this report, my signature does not imply that I agree with this evaluation.*