



## 2024 Work Experience Supervisor Evaluation

Name of Student: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_

Total Hours: \_\_\_\_\_

	Excellent	Good	Needs Work Improvement	Comments
Punctuality				
Initiative				
Willingness to Work				
Response to Advice				
Appearance and Dress				
Courtesy				
Reliability				
Suitability to This Work				
Attitude				

Signed: \_\_\_\_\_

Thank You!

Please Return to your placement student *or*  
Mr. Van Zyl  
Rehoboth Christian College  
92 Kenwick Rd  
KENWICK WA 6107  
[wblennerhassett@rehoboth.wa.edu.au](mailto:wblennerhassett@rehoboth.wa.edu.au)