



Office of Student Financial Aid

Federal Work Study Position Review

Student's Name _____ Student's KSU ID # _____
Start Date _____ End Date _____
Department _____ Supervisor _____

General Performance: Please rate the department's performance in each of the following areas using the scale below. If you give the department a rating of 1 or 2, please elaborate.

Rating Scale: 1 = Poor, 2 = Fair, 3 = Average, 4 = Good, 5 = Excellent

Table with 3 columns: Professional Traits, Rating, Explanation (optional). Rows include Accommodating to your Availability, Explained office procedures and policies, Work tasks and duties related to your major/education, Work tasks and duties provided needed skills for the workforce, Communication Skills, On-the-job Training, Overall Satisfaction working for the department.

If eligible, would you want to work for this department next year? Yes No

What were the main tasks and duties assigned to you? _____

Please include any additional information about your overall experience (optional) _____

Student's Signature _____ Date _____