

**SUPERVISOR COMPLETES AND RETURN TO HUMAN RESOURCES #21**

**P O L K   S T A T E   C O L L E G E**  
**V O L U N T E E R   E V A L U A T I O N S**

Volunteer Name \_\_\_\_\_ Event \_\_\_\_\_

Date of Event \_\_\_\_\_ Location of event: \_\_\_\_\_ Winter Haven \_\_\_\_\_ Lakeland

Service or task volunteer assigned to perform \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of supervisor or shift leader completing this form \_\_\_\_\_

Item of Review	Rating of	Notes &
Comments		
comment on	1 = Above average	Please
1 or 3	2 = Acceptable	Ratings of
	3 = Not Acceptable	

1. Punctuality	*		
2. Personal Appearance	*		
3. Knowledge for Task			
4. Helpfulness—Students			
5. Helpfulness—College Staff			
6. Dependability			
7. Confidentiality			
8. Response to Directions			
9. Initiative			
10. Attention to Details			
11. Cheerful-Helpful Attitude			
12. Rule/Policy Understanding			
13. Physical Fitness	**		
14. Poise—Self Control	**		
15. Emotional Stability	**		
16. Communications	**		

\* Consider for pre-assignment orientation as well as event worked.

\*\* Were special accommodations necessary for volunteer to accomplish tasks because of a handicap or disability? If so, please make recommendations in "Additional Related Comments".

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Future use for College events:

a. ↑ Schedule Again    ↑ Could also work well in \_\_\_\_\_  
List area or event

b. ↑ Do not reschedule for this type of event. Why? \_\_\_\_\_

\_\_\_\_\_

c. ↑ Should be allowed to remain in pool for future assignments.

d. ↑ Should be released from volunteer program. Why? \_\_\_\_\_

\_\_\_\_\_

Additional related comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor or shift leader  
signature \_\_\_\_\_ Date \_\_\_\_\_

Upon completion please return to the PSC Human Resources office for retention in the volunteer files. Available for supervisor review.