# Performance Review: Graduate Assistant (Administrative)

**GA Name:**

**Semester:**

**Supervisor:**

**Assignment:**

<table>
<thead>
<tr>
<th>PERFORMANCE FACTORS</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td><strong>Dependable</strong>: The GA works closely with his/her supervisor to carry out assigned tasks.</td>
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<td><strong>Quality of Work</strong>: The GA produces accurate, comprehensive, and well-organized work in a very efficient manner.</td>
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<td><strong>Interpersonal Relations</strong>: The GA behaves in a professional manner that is respectful of others’ ideas and opinions.</td>
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<td><strong>Attendance &amp; Punctuality</strong>: The GA is present and on time for work, meetings, and scheduled events, with any absences scheduled and reported well in advance.</td>
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<td><strong>Compliance</strong>: The GA consistently follows program/department, school, and university regulations.</td>
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<td><strong>Academic Honesty</strong>: The GA maintains and enforces standards of academic honesty and integrity.</td>
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<td><strong>Records</strong>: The GA maintains all records pertinent to his or her assignments.</td>
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**Comments:**
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What were the GA’s main strengths?


How might this GA improve?


Additional Comments?


Overall Evaluation:

☐ Exceeds Expectations
☐ Meets Expectations
☐ Fails to Meet Expectations

Eligible for rehire:  ☐ Y  ☐ N

Reassign:  ☐ Y  ☐ N

Comments by GA:


SIGNATURES (Supervisor should review performance evaluation with GA and obtain the GA’s signature below*)

________________________________________  __________________________
Supervisor  Date  *Graduate Assistant  Date

________________________________________  __________________________
Department Head  Date