



NCC/AmeriCorps End  
of Term Evaluation



\_\_\_\_\_  
AmeriCorps Member's Name

\_\_\_\_\_  
Date of Evaluation

\_\_\_\_\_  
Supervisor Name

\_\_\_\_\_  
Service Site

E – Excellent    A – Above Average    S – Satisfactory    N – Needs Improvement    U – Unsatisfactory

Factors	Rating	Comments
<b>ATTENDANCE</b> AmeriCorps member attends placement every day, notifies Supervisor if unable to attend, and is on time to site.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>BEHAVIOR PATTERN</b> The stability, politeness, and judgement shown on the job. AmeriCorps members' level of maturity.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>CREATIVITY</b> The degree to which AmeriCorps member suggests ideas and discovers better ways of accomplishing goals.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>DEPENDABILITY</b> The degree to which AmeriCorps member can be relied upon to complete a task or assignment.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>INDEPENDENCE</b> The degree to which work is accomplished with little or no supervision.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>INITIATIVE</b> The degree to which AmeriCorps member searches out new tasks and expands abilities.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>INTERPERSONAL RELATIONSHIPS</b> The willingness and ability to communicate, cooperate, and work with others.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>ATTITUDE</b> AmeriCorps member's attitude while at placement site.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____
<b>INTERACTION WITH SITE SUPERVISOR</b> The level of interest, respect,, quality of work and engagement AmeriCorps member shows with clients.	E	_____
	A	_____
	S	_____
	N	_____
	U	_____

**NCC AmeriCorps Member Evaluation**

<b>KNOWLEDGE</b> The level of knowledge needed to perform and exceed assigned task.	<b>E A S N U</b>	_____ _____ _____
<b>PRODUCTIVITY</b> The amount of service finished in a specific amount of time.	<b>E A S N U</b>	_____ _____ _____
<b>ASSIGNMENTS, TASKS AND PROJECTS COMPLETED SATISFACTORILY</b>	<b>YES  NO</b>	_____ _____
<b>QUALITY</b> The accuracy of detail, and acceptability of work accomplished.	<b>E A S N U</b>	_____ _____ _____
<b>OVERALL PERFORMANCE</b> Please rate the overall performance of the AmeriCorps member.	<b>E A S N U</b>	_____ _____ _____
<b>REQUIRED HOURS COMPLETED FOR EDUCATION AWARD</b>	<b>YES NO</b>	Hours Completed to Date: _____
<b>ELIGIBLE FOR ANOTHER TERM OF SERVICE</b>	<b>YES NO</b>	

AmeriCorps Member Comments:

\_\_\_\_\_  
AmeriCorps Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
AmeriCorps Program Director Signature

\_\_\_\_\_  
Date