

JOB SHADOW--EMPLOYER EVALUATION

Employer: Please complete this short evaluation for the student who participated in the job shadow with you. Thank you.

Name of Student: _____

Please rate the student with a "yes" or "no" answer.

_____ Was the student appropriately dressed for the job shadow? (they should not be wearing jeans)

_____ Did the student listen and follow directions?

_____ Did the student use appropriate manners?

_____ Did the student seem motivated and interested?

_____ Did the student ask appropriate questions?

_____ Was the student on time for the shadow?

_____ Was the student at your place of business for at least four hours?

_____ Was the student writing answers to their questions they asked you?

_____ Did the student bring paper for notes, questions, and pen/cil?

_____ Did the student look you in the eye when speaking with you?

_____ Did the student introduce himself/herself with a handshake and then thank you at the end of the job shadow?

Comments:

Signature of Employer

Date

Printed name of Employer

Telephone Number of Employer

