

Holman Middle School Community Service Evaluation

Student's Name _____ Date(s) of Service _____

Total Hours _____ Organization _____

Sponsor's Signature _____

Description of Volunteer's duties or assignments: _____

Dear Sponsor:

We appreciate your taking time to fill out the following questions:

5=excellent 4=above average 3=average 2=below average

Responsibility/Dependability

| | | | | | |
|--|---|---|---|---|-----|
| Shows concerns for others (co-workers/those being assisted) | 5 | 4 | 3 | 2 | n/a |
| Attendance | 5 | 4 | 3 | 2 | n/a |
| Arrives on time | 5 | 4 | 3 | 2 | n/a |
| Completes assigned tasks | 5 | 4 | 3 | 2 | n/a |
| Listens carefully to instructions | 5 | 4 | 3 | 2 | n/a |

Attitude

| | | | | | |
|--------------------------------|---|---|---|---|-----|
| Shows courtesy/respect | 5 | 4 | 3 | 2 | n/a |
| Ask questions/uses resources | 5 | 4 | 3 | 2 | n/a |
| Accepts tasks willingly | 5 | 4 | 3 | 2 | n/a |
| Volunteers for extra duties | 5 | 4 | 3 | 2 | n/a |
| Helps in a difficult situation | 5 | 4 | 3 | 2 | n/a |
| Completes what he/she begins | 5 | 4 | 3 | 2 | n/a |

Comments: _____

(Use back if necessary)

Please return to:
Holman Middle School
11055 St. Charles Rock Road
St. Ann, MO 63074
Attention: K. Paluczak, T. Cornell or E. Stevens