

Graduate Assistant Performance Review

Graduate Assistant Name:

UCID:

Instructor of Record/Researcher Name:

Department :

Category of Appointment:

Semester Period of Appointment:

Date of Performance Review:

Purpose :

As stated by the Collective Agreement, written performance feedback is encouraged to ensure Graduate Assistants are developing successful professional skills and have guided feedback to improve their overall performance.

Rating Scale Defined:

E	Exceptional
S	Satisfactory
U	Unsatisfactory
N	Unknown / Not Applicable

General Evaluation:

for
office/laboratory/lecture time.

sched

3. GA is proficient and professional in oral and written communications and communicates effectively to foster and promote academic achievement.	
4. GA demonstrates technical and functional knowledge.	
5. GA interacts with students and supervisor effectively, contributing to an inclusive and welcoming learning environment.	
6. GA develops trust and demonstrates ethical behavior, including following all regulations regarding confidential information.	
7. GA appropriately handles issues and conflicts by analyzing problems effectively.	

Evaluators Comments:

(Please comment on specific aspects of the assistant's general performance by highlighting strengths and areas of development.)

Graduate Assistant's Comments:

(Please comment on specific aspects of the supervisor's assignments and guidance.)

The signature of the Graduate Assistant and Instructor of Record/Researcher indicates that they have had the opportunity to review and discuss the Assistant's performance; it does not imply agreement.

Graduate Assistant:

Print Name

Signature

Date

Instructor of
Record/Researcher:

Print Name

Signature

Date

Cc: Student Copy
Department File