

EMPLOYMENT TRAINING EVALUATION

Trainee/Employee Name: _____

Date: _____

Job Title: _____

Job Site: _____

Placement Date: _____

Current Date: _____

Job Coach, (if applicable): _____

Please evaluate the employee on each of the behaviors below by checking the appropriate box.

The employee	Acceptable	Needs Improvement
<input type="checkbox"/> Arrives and leaves on time	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Has good attendance	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Makes appropriate phone contact	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Takes breaks appropriately	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Maintains good appearance	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Works well without reminders	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Initiates work on own	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Knows essentials of job	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Has mastered aspects of job	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Works at acceptable speed	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Gets along with co-workers	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Follows instructions	<input type="checkbox"/>	<input type="checkbox"/>

Comment:

Signature: _____

To function at any level of independent living, students need to be aware of the following and know how to do each or identify whom to ask to do:

Planning/Scheduling		Restaurant	
<input type="checkbox"/>	Following daily routines	<input type="checkbox"/>	Reads menu (or alternative)
<input type="checkbox"/>	Show up on time	<input type="checkbox"/>	Communicates to waitress/waiter
<input type="checkbox"/>	Get to where you are supposed to be	<input type="checkbox"/>	Uses manners
<input type="checkbox"/>	Adapts to change routine	<input type="checkbox"/>	Tallies bill (include tip, if necessary)
<input type="checkbox"/>	Able to tell time	Dressing / Undressing	
<input type="checkbox"/>	Prepares for special outing	<input type="checkbox"/>	Undress self
<input type="checkbox"/>	Arranges special things to do	<input type="checkbox"/>	Chooses appropriate clothing
<input type="checkbox"/>	Handles logistics	<input type="checkbox"/>	Dresses self
<input type="checkbox"/>	Involved in planning an event	<input type="checkbox"/>	Dresses appropriate for season
Time Management		Hygiene & Toileting	
<input type="checkbox"/>	Plans homework time	<input type="checkbox"/>	Use private and public
<input type="checkbox"/>	Arranges study time/attends to homework	<input type="checkbox"/>	Closes door for bathing, toileting, dressing
<input type="checkbox"/>	Plans time for chores, meetings	<input type="checkbox"/>	Wipes self, flushes
<input type="checkbox"/>	Arranges transportation	<input type="checkbox"/>	Washes hands and face
Social Skills		<input type="checkbox"/>	Bath/shower
<input type="checkbox"/>	Telephone	<input type="checkbox"/>	Shampoo/rinse hair
<input type="checkbox"/>	Phone Etiquette	<input type="checkbox"/>	Manages menstrual care
<input type="checkbox"/>	Take Messages	<input type="checkbox"/>	Shaves
<input type="checkbox"/>	Dials phone	<input type="checkbox"/>	Uses deodorant
<input type="checkbox"/>	Can use phone for emergency	<input type="checkbox"/>	General health concerns
<input type="checkbox"/>	Can use directory	<input type="checkbox"/>	Cold/flu knowledge
Reciprocal Relationships		Caring for Others	
<input type="checkbox"/>	Gift giving	<input type="checkbox"/>	Pet care
<input type="checkbox"/>	Remembers birthdays/send thank you cards	<input type="checkbox"/>	Sibling care
General Shopping - Handling Money/Budgets		<input type="checkbox"/>	Babysitting
<input type="checkbox"/>	Makes shopping lists; recognizes budget constraints	<input type="checkbox"/>	Elder care
<input type="checkbox"/>	Handles money exchanges	<input type="checkbox"/>	Handles money exchange
Local Items		Grooming & Dressing	
<input type="checkbox"/>	Pushes carts	<input type="checkbox"/>	Brush teeth
<input type="checkbox"/>	Use store directory	<input type="checkbox"/>	Use mouthwash
<input type="checkbox"/>	Asks for help	<input type="checkbox"/>	Brush/comb hair
<input type="checkbox"/>	Follows list	<input type="checkbox"/>	Styles hair
<input type="checkbox"/>	Makes choices considering cost comparison	<input type="checkbox"/>	Uses make-up
Handling Household Chores		<input type="checkbox"/>	Cleans eyeglasses
<input type="checkbox"/>	Does laundry	<input type="checkbox"/>	Cleans hearing-aid mold
<input type="checkbox"/>	Vacuum/dusts/sweeps	<input type="checkbox"/>	Maintains appearance