



New Jersey Bonner AmeriCorps Program



End of Term Performance Evaluation

Instructions: This evaluation should be completed by the Member's Site Supervisor or Campus Director. The content of the evaluation must be discussed with the Member, and the Member must be given a copy of the evaluation for his/her records.

Member Information

Community Partner Information

First and Last Name of AmeriCorps Member

Supervisor

Campus Name

Agency

Date

Member Performance Evaluation

Please complete the statements below.

1. The Member has been effective in:

2. The Member has shown growth in:

3. The Member requires growth in:

Other Evaluation Criteria

Please assess the Member using the following scale:

1 - POOR 2 - FAIR 3 - GOOD 4 - VERY GOOD 5 - EXCELLENT

1. Reliability	1	2	3	4	5
2. Ability to take initiative	1	2	3	4	5
3. Ability to solve problems	1	2	3	4	5
4. Ability to work with clients	1	2	3	4	5
5. Ability to work independently	1	2	3	4	5

Leadership Skills

Did the Member serve in a leadership capacity during his/her term of service? If yes, please describe: Yes No

Term of Service

- 1. Did the Member successfully complete the required number of service and training hours? Yes No
- 2. Did the Member meet performance criteria that was clearly communicated at the beginning of the term of service? Yes No
- 3. Did the Member satisfactorily complete assignments? Yes No

***Please note that an answer of NO will prevent the Member from serving in AmeriCorps in the future.**

Acknowledgments

Member Signature **Date**

Site Supervisor Signature (if applicable) **Date**

Campus Director Signature (if applicable) **Date**

Program Staff Signature **Date**