

**JOB SHADOW EMPLOYER EVALUATION
LINDSAY HIGH SCHOOL**

Thank you for hosting a student at your workplace. We would like to provide the most positive experience possible for both employers and our students. Therefore, please take a few moments to share your assessment of the experience. Your input of the job-shadowing experience and the student who shadowed you will be very valuable as we seek to improve the senior project job-shadowing activity.

Name Eriselda Peters Phone (559) 562-5916
 Company/Organization Washington Elementary
 Address 451 E. Samoa St., Lindsay, CA. 93247
 Student Name Leyvi Andrade Date of Shadow Monday, February 23

Please rate the student, using the following scale, by circling the appropriate number:
 4 – exceeds expectations; 3 – meets expectations; 2 – below expectations, 1 – unacceptable

Student Readiness

_____ Arrived on time	<u>4</u>	3	2	1
_____ Displayed Enthusiasm and interest	<u>4</u>	3	2	1
_____ Appeared clean and well-groomed	<u>4</u>	3	2	1
_____ Wore appropriate clothing	<u>4</u>	3	2	1
_____ Showed appropriate behavior at work site	<u>4</u>	3	2	1
_____ Asked appropriate questions	<u>4</u>	3	2	1
_____ Demonstrated good listening skills	<u>4</u>	3	2	1

Business Ratings

_____ You were satisfied overall with experience	<u>4</u>	3	2	1
_____ Your objective was achieved	<u>4</u>	3	2	1
_____ You would recommend student for a similar experience	<u>4</u>	3	2	1
_____ You were satisfied with student knowledge about the business or organization	<u>4</u>	3	2	1

Would you be able to host another Lindsay High School student? yes
 Are you able and willing to host a bilingual student? yes

Do you have any suggestions for improving the job-shadow experience for students?

Eriselda Peters Employer Signature
Leyvi Andrade Student Signature

Date: 2/23/15
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