

**Graduate Assistant Work Performance Evaluation**  
Department of Retail, Hospitality & Tourism Management

Student: \_\_\_\_\_ ID: \_\_\_\_\_

Email: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Assignment: \_\_\_\_\_

Semester: \_\_\_\_\_ Year: \_\_\_\_\_

	Excellent	Good	Fair	Needs Improvement
Diligence				
Skill/Competence				
Attitude				
Overall Performance				

Other comments:

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Suitability for other assignments:

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\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
GTA Signature

**TO BE COMPLETED AT THE END OF EACH SEMESTER**