Minot State University
Graduate Assistantship
Initial Performance Self-Evaluation

*Directions: Graduate Assistant completes this form during the 5th week (3rd week summer) of the semester. **Completed evaluation remains confidential**; graduate assistant may share with his/her supervisor if he/she wishes to do so. Submit to the Graduate School by the end of the week.*

Today's Date: _____

Type of Assistantship: **Appointment FTE:**
    ☐ **Teaching**   ☐ **Eighth time**
    ☐ **Research**   ☐ **Quarter time**
    ☐ **Service**   ☐ **Half time**

Program: _____

Supervisor: _____

Please rate each of the following based on your experience to date as a Graduate Assistant. Place a check mark (√) in the appropriate box at the end of the line.
SA=Strongly Agree; A=Agree; N=Neutral; D=Disagree; SD=Strongly Disagree

Criteria	SA	A	N	D	SD
Responsibilities agree with the Position Description					
Hours required are consistent with Position Description					
Supervisor's expectations of me are reasonable					
Compensation is appropriate for responsibilities					
Supervisor provides direction and guidance as needed					
Time commitment is appropriate for responsibilities					
Experience is meeting my expectations					
Work is adding to my learning experience as a graduate student and as a professional					

Please provide comment or further explanation for any of your ratings above, especially if you have concerns. ☐ Please contact me to discuss my assistantship.

_____
Graduate Assistant's Signature