



<b>Quality of Service</b>	<b>Needs Improvement</b>	<b>Meets Expectations</b>	<b>Exceeds Expectations</b>
Tasks are performed conscientiously and according to high standards of quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tasks are done thoroughly and followed up as required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member is willing to perform duties as assigned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member seeks way to continuously improve quality of service, projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tasks are done to the satisfaction of the Site Supervisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asks for help when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Devotes time to work to get assigned responsibilities done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.			

<b>Initiative</b>	<b>Needs Improvement</b>	<b>Meets Expectations</b>	<b>Exceeds Expectations</b>
Attempts to find solutions to problems encountered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks assistance when necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member can prioritize tasks to accomplish both urgent and important tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member completes assignments independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Members seeks out new projects or directions when appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.			

<b>Communication</b>	<b>Needs Improvement</b>	<b>Meets Expectations</b>	<b>Exceeds Expectations</b>
Communicates with community, youth and staff effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responds well to feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member speaks openly, honestly, and uses good communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.			

<b>Collaboration</b>	<b>Needs Improvement</b>	<b>Meets Expectations</b>	<b>Exceeds Expectations</b>
Member seeks to involve others in decision making or when trying to solve problems or achieve goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member works well collaboratively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adapts to new methods or tasks in a cooperative manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click or tap here to enter text.			

## **Narrative**

**Please describe the one most significant impact that the AmeriCorps member has had on your programs.**

Click or tap here to enter text.

<b>Has the member service plan been effective in guiding the member's service?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Click or tap here to enter text.		

<b>Is the AmeriCorps member meeting or have they met the goals identified in the member service plan?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Click or tap here to enter text.		

<b>Is the member on track to complete or have they completed the 1700 hour for full-time (or 900 hour for half-time) requirement for the education award?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, please explain: Click or tap here to enter text.		

<b>Has the member served satisfactorily?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Site Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

AmeriCorps Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*DO NOT SUBMIT without BOTH signatures and entire form completed.*

*\*By signing this document you agree that you have read and reviewed.*

**Please scan and email to [communityhealth@marshfieldclinic.org](mailto:communityhealth@marshfieldclinic.org)**

Supervisor, keep original for your files