



## Job Shadow – Student Evaluation Form

Please evaluate your experience with the student by providing the information below. Please return this signed form to [radtech@garrettcollege.edu](mailto:radtech@garrettcollege.edu). For more information or questions please call Carolyn Deniker, Associate Dean of Academic Affairs, at (301) 387-3014.

Student Name	
Date of Job Shadow	
Location of Job Shadow	
Student Arrival Time	
Student Departure Time	

The student:	Excellent	Satisfactory	Unsatisfactory	Didn't Observe
Arrived on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressed appropriately for work setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Followed technologist's instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicated well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was polite & courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognized and respected authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asked appropriate questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indicated a genuine interest and desire to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please rate your <b>overall</b> experience with this student.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

1. Were there any standout moments during the day that demonstrated the student's potential or areas where they excelled?
  
2. Did the student seem engaged and interested in the work, or did they appear passive or distracted? Can you provide examples?
  
3. Was the student receptive to feedback or suggestions? Did they ask any insightful questions or seek clarification on the work they were exposed to?
  
4. Did the student do or say anything that concerned you? If so, what?
  
5. Based on this experience, what advice would you give to the student if they were to pursue this career?

Additional Comments:
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Evaluator Name (please print)	
Signature of Evaluator	