



When you have completed your service learning activity, give this form to your supervisor to complete.
MiraCosta College Service Learning Office, Oceanside Campus - Room 3306, (760) 795-6616

Student Name: _____ Semester _____

Instructor's Name: _____ Course _____

Community Site: _____

TO THE SUPERVISOR: Please check the appropriate responses:

	Excellent	Good	Fair	Poor
Student Reliability (punctual, completed service hours)				
Sensitivity to Others (sensitive to other's needs, respects differences)				
Willingness to Learn (open to learning new things, receiving feedback)				
Communication Skills (listening, speaking, writing)				
Teamwork (worked well with others, positive attitude)				
Overall Evaluation of Performance				

Additional Comments: (use back of paper if necessary)

Supervisor Name (Please Print): _____

Supervisor's Signature: _____ Date: _____

Email Address: _____

TO NOMINATE THIS STUDENT FOR A SERVICE LEARNING AWARD,
please email Bea Palmer at bpalmer@miracosta.edu

**THIS COMPLETED EVALUATION CAN BE RETURNED DIRECTLY TO THE STUDENT OR MAILED TO
THE SERVICE LEARNING CENTER, 1 BARNARD DR., OCEANSIDE, CA 92056 or email to
Bea Palmer, Program Coordinator at servicelearning@miracosta.edu**