



## Student Scholarship Application Professional Development Assessment

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Evaluator Signature (Advisor or Department Chair): \_\_\_\_\_

Please note that this form must be submitted by the advisor or department chair to the following email address: **recognitions@alota.org**. This form will not be accepted if received from the student. Due no later than **August 23, 2021**.

**Instructions: For each professional behavior, place a check in the appropriate column**

	Excellent	Good	Adequate	Poor	Very poor	Not observed
1. <b>Dependability</b> (i.e. on time for class, handing in assignments)						
2. <b>Professional Presentation</b> (i.e. positive attitude)						
3. <b>Initiative</b> (i.e. energetic, positive and motivated behavior)						
4. <b>Empathy</b> (i.e. listens to and considers the ideas and opinions of others)						
5. <b>Cooperation</b> (i.e. working effectively with others)						
6. <b>Organization</b> (i.e. prioritizes tasks, manages time well)						
7. <b>Verbal communication</b> (i.e. verbally interacts appropriately)						
8. <b>Respect</b> (maintains confidentiality)						
9. <b>Integrity</b> (i.e. honest, trustworthy, loyal)						

Adapted from J. Kastar, N. Clark, D. Watson, S. Pfsister, 1994.