

**Department of Health Services Policy and Management  
Arnold School of Public Health, University of South Carolina  
Student Evaluation of the Graduate Assistantship Experience  
(Return the completed form to Mitchell Taylor)**

Semester and year: \_\_\_\_\_ Student name: \_\_\_\_\_  
 Degree objective: MHA / MPH Number of semesters in this GAship: \_\_\_\_ / \_\_\_\_ months  
 GA organization: \_\_\_\_\_ Unit/department: \_\_\_\_\_

Hours per week: \_\_\_\_\_ Years of full time work experience *prior to* the program: \_\_\_\_\_

**1. Please rank order how important your GA-ship is for you on:**

RANK

- Work experience
- Income
- Tuition reduction
- Professional experience in a health service or allied setting

**2. To what extent was your GA-ship this semester a learning experience?**

Not at all      A little      Moderate      A lot      I am a different person due to this GAship  
 1                      2                      3                      4                      5

**3. a) To what extent did you gain (or not gain) the following skills/competencies?**

	Not at all 1	A little 2	Moderate 3	A Lot 4	I am a different person 5
Organizational skills	1	2	3	4	5
Management skills	1	2	3	4	5
Accounting	1	2	3	4	5
Oral communication	1	2	3	4	5
Written communication	1	2	3	4	5
Making presentations	1	2	3	4	5
Scientific knowledge	1	2	3	4	5
Program implementation	1	2	3	4	5
Cultural Competency	1	2	3	4	5
Data management	1	2	3	4	5
Research skills	1	2	3	4	5
Written communication	1	2	3	4	5

**3. b) Any other comments on your GAship experience:**

**4. Self-assessment of performance:** In your estimation, to what extent did YOU meet your SUPERVISOR'S EXPECTATIONS on the following (*Please check appropriate box.*)

	Excellent	Good	Average	Could improve	Poor	Not applicable
	5	4	3	2	1	NA
Prompt, maintains reliable schedule	5	4	3	2	1	n/a
Professional appearance	5	4	3	2	1	n/a
Professional Behavior	5	4	3	2	1	n/a
Inter-personal relations	5	4	3	2	1	n/a
Responds promptly to work requests	5	4	3	2	1	n/a
Reliably completes tasks	5	4	3	2	1	n/a
Initiative	5	4	3	2	1	n/a
Eagerness to learn	5	4	3	2	1	n/a
Accommodates new work needs	5	4	3	2	1	n/a
Meets deadlines	5	4	3	2	1	n/a
Oral communication	5	4	3	2	1	n/a
Written communication	5	4	3	2	1	n/a

*Comments: If your performance had changed later in the semester, indicate the items here.*

Performance item	Improved/Worsened

**5. Time utilization:** Indicate how your GAship time was spent (Percentages MUST add to 100).

Routine chores (filing, faxing, photocopying, errands)	___ %
Simple tasks pertinent to your department's core business or mission (e.g finance, quality improvement, etc)	___ %
Responsibilities pertinent to the core mission, with some autonomy of execution	___ %
Major responsibility for planning or executing a project	___ %
Attend departmental or work group meetings	___ %
Attend interdepartmental/ senior management meetings	___ %
Work with other departments/units for task or program planning/execution	___ %
Shadowing managers/executives/clinical functionaries	___ %
Idle time or busy work with no apparent work objective	___ %

*Comments: If your tasks changed later in the semester, indicate the items here.*

Task/ Activity	Improved/Worsened

(Fall 2009)

**Department of Health Services Policy and Management  
Arnold School of Public Health, University of South Carolina  
Preceptor/Supervisor's Evaluation of Graduate Assistant's Performance**

Organization: \_\_\_\_\_  
 Preceptor: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_  
 Student name: \_\_\_\_\_ Date of evaluation: \_\_\_\_\_  
 Number of semesters this student has worked for you so far: \_\_\_\_\_

**I. GA performance dimension: (Please check appropriate box.)**

	Excellent	Good	Average	Could improve	Poor	Not applicable
	5	4	3	2	1	NA
Prompt, maintains reliable schedule	5	4	3	2	1	n/a
Professional appearance	5	4	3	2	1	n/a
Professional Behavior	5	4	3	2	1	n/a
Inter-personal relations	5	4	3	2	1	n/a
Responds promptly to work requests	5	4	3	2	1	n/a
Reliably completes tasks	5	4	3	2	1	n/a
Initiative	5	4	3	2	1	n/a
Eagerness to learn	5	4	3	2	1	n/a
Accommodates new work needs	5	4	3	2	1	n/a
Meets deadlines	5	4	3	2	1	n/a
Oral communication	5	4	3	2	1	n/a
Written communication	5	4	3	2	1	n/a

**II. General comments on the *student's strengths and weaknesses*?**

**III. Please recommend *two top priority areas for improvement* (your items may be different from the above).**

**IV. Based on the GA's performance, *would you rehire this student* if you needed help in future semesters? Yes / No/ Can't say, too early**

**V. Based on the GA's performance and attitudes *would you recommend this student to a potential employer* upon his/her graduation? Yes/ No/Cant say, too early**

***Other comments on the GAship experience or process:***

***Thank you! Please return the survey (email or fax) to Mitchell Taylor or fax to HSPM at 803.777.1836. (Pl. call 777-1627 before faxing, so that we can retrieve it immediately.)***