

GW CCS Professional Praxis Final Packet



All portions of this form are required. Any incomplete forms will be sent back for correction.

Employer: When your section of this form is complete, please return it to the student.

Student: This form is due via ccsproprax@gwu.edu by the date listed on <https://careerservices.gwu.edu/professional-praxis> for the given semester, regardless of when the job or internship ends. Please direct any questions to ccsproprax@gwu.edu.

Student's Full Name:	Student's GWID:
Supervisor's Name:	Company:
Semester: (check one) Spring Summer Fall	Year:

Performance Review

This portion is to be completed and signed by the student's direct supervisor. Please check the box next to the term that best describes the student's skill level for each attribute, and write any comments in the space provided.

Communication: Effectively communicates by phone, email, and in person, with co-workers, customers, and supervisor(s).	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Job Skills & Technical Skills: Demonstrates the knowledge and skills required to perform the job effectively.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Productivity & Quality of Work: Delivers high quality work in a timely manner. Pays attention to deadlines.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Teamwork: Treats others with courtesy and respect. Contributes to team success. Responds well to feedback.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Initiative: Asks for additional projects, develops new ideas, and proactively seeks out opportunities to contribute.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Dependability: Is trustworthy, punctual, reliable, and responsible. Inspires confidence in supervisors and coworkers.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Judgement: Makes smart and educated decisions, escalating to supervisor as appropriate.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Professionalism: Demonstrates a professional demeanor, dresses appropriately, maintains confidentiality, etc.	
<input type="checkbox"/> Strength <input type="checkbox"/> Proficient <input type="checkbox"/> Needs Improvement	
Overall Assessment: Please use the space below to describe the student employee's key strengths, identify any areas for growth, and note any significant accomplishments during this review period.	

Supervisor's Signature: _____ **Date:** _____
(Handwritten or digital signatures only – script-like fonts will not be accepted)



Student Reflection

This portion is to be completed and signed by the student employee.

Read the instructions for each question, and provide a thoughtful answer. Use complete sentences.

Read the Performance Review from your supervisor. Reflect on their assessment of your work. What will you strive to improve? What are you most proud of? How has this experience helped your professional development?

Learning Outcomes:

Think about the learning goals you set for yourself at the beginning of the semester. Did you accomplish these goals? Did you make progress towards accomplishing them? Describe the outcome of your attempt to achieve these goals.

Knowledge & Skills:

Identify new or enhanced skills that you acquired from your job or internship this semester.

Describe three situations where you were able to use your new skills.

What academic experiences were you able to apply to your work duties?

Work Culture:

What did you learn about your personal work style preferences? (Ex. Do you prefer working alone or in a team? What is your preferred way of communicating?)

Describe a situation where you worked with a team of co-workers. What role did you play? How did you contribute?

Personal Experience:

Which aspects of your job did you enjoy the most? Why?

Name one thing that you would change about your experience, and describe why.

How do you think your work has contributed to your employer and the clients they serve?

How do you think this experience will impact your future career choices?

Student's Signature: _____ **Date:** _____

(Handwritten or digital signatures only – script-like fonts will not be accepted)