Temporary Employee Evaluation Form

Name _____

Department Name _____

Position Title _____

1. **On a scale of 1-5, how would you rate the ease of process for applying to Panther Temps and being placed on an assignment?**

2. **Was your assignment in line with what you were looking for? Were you appropriately placed? Please explain.**

3. **Did you receive a detailed explanation of the expectations of your assignment?**

4. **In the event this position was approved for full-time status, would you accept an offer of employment? If no, please explain.** _____
   _____

   Yes **No**

5. **Would you consider working in another temporary position with Georgia State? If no, please explain.** _____
   _____

   Yes **No**

Additional Comments and Suggestions for Panther Temps:

_____
_____
_____
_____

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM.

Please return to:
Zachary T. Hoxie
Fax: 404-413-3275
In Person: One Park Place, Suite 344
E-mail: zhoxie1@gsu.edu