

MISD-Bilingual Education Program Instructional Assistance/ Tutor Performance Evaluation

Please send the completed evaluation to Su McKeithen-Polish via e-mail at smpolish@mysd.net or by fax at (586) 286-2809.

Date:

Tutor:

Student:

District:

School:

Teacher/Counselor:

Please check the appropriate box:

- | | | | | |
|---|---------------------------------|--------------------------------|---------------------------------|------------------------------|
| 1. Does the tutor show up to work with your student? | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Rarely | <input type="checkbox"/> N/A |
| 2. Does the tutor communicate with you about the student? | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Rarely | <input type="checkbox"/> N/A |
| 3. Is the tutor helpful when needed? | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Rarely | <input type="checkbox"/> N/A |
| 4. Are you satisfied with the tutor's assistance? | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Rarely | <input type="checkbox"/> N/A |

Teacher/Counselor Suggestions:
