

**State of Illinois Department of Human Services/
Division of Rehabilitation Services
STUDENT WORKER PROGRESS REPORT**

Progress Report Due Dates:

1st Period – 11/12/2010 ♦ Please ♦
 2nd Period – 1/14/2011 ♦ Circle ♦
 3rd Period – 3/11/2011 ♦ Correct ♦
 4th Period – 5/13/2011 ♦ Period & ♦
 ♦ Date ♦

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This form is used to assess the student's work performance at the end of each progress period.

Student Name _____ **Job Title** _____

Hourly Wage \$ _____ **Training/Job Site** _____

Address _____

Period covered by report: _____ **through** _____

**Please comment on the level of student's
Capability for each work characteristic. ↓**

<ol style="list-style-type: none"> 1. Work Speed 2. Work Quality 3. Work Attitude/Motivation 4. Work Behavior 5. Attendance/Punctuality 6. Appearance/Grooming/Hygiene 7. Accepts Supervision/Correction 8. Understands & Retains Instructions 9. Recognizes Work to Be Done 10. Recognizes Mistakes 11. Plans and Organizes Work 12. Works Without Supervision 13. Initiates Task(s) 14. Trustworthiness 	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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Specific Job Duties as listed on Work Site Form	Outstanding	Satisfactory	Unsatisfactory
1.			
2.			
3.			
4.			
5.			
6.			

IL 488-0730

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STUDENT WORKER PROGRESS REPORT (Continued)

Is student ready for competitive employment? _____ Yes _____ No

If "Yes", what type of competitive employment best meets student's talents, interests, and needs?

If "No", what is preventing student from getting or keeping competitive employment?

Action Plan: _____

Next Review Date: _____

Immediate Job Supervisor Date

School Coordinator Date

Student Date

Distribution: S.T.E.P. Liaison Counselor/TS
Employer