

Freedom Village at Brandywine Scholarship Fund, Inc.

Supervisor's Confidential Evaluation 2025

Completed by Applicant

Name: _____ Email Address: _____

FVB Position: _____ Supervisor's Name: _____

Completed by FVB Supervisor

1. Does applicant comply with department rules and safe practices?

Always _____ Mostly _____ Seldom _____

2. Is applicant a team player (cooperation, assistance, etc.)? Yes: _____ No: _____

If yes, please indicate their level of cooperation with all staff members and residents.

Outstanding: _____ Very Good: _____ Good: _____ Average: _____

Please provide examples on the reverse side.

3. Is applicant attentive to the needs of residents? Yes: _____ No: _____

Please provide examples on the reverse side.

4. Does applicant go above and beyond what is required? Yes: _____ No: _____

If yes, please rate: Quite Often: _____ Often: _____ Seldom: _____

Please provide examples on the reverse side.

5. Please rate reliability of applicant in attendance and carrying out their responsibilities.

Very Good: _____ Good: _____ Fair: _____ Poor: _____

6. Does the applicant's personal appearance meet the expectations of their position? Yes _____ No _____

If no, please provide explanation on reverse side.

7. How long has the applicant worked under your supervision? _____

8. What words describe the demeanor of the applicant with residents? Examples: Courteous, willing to serve, willing to carry out their responsibilities, shows initiative, sense of humor, concern, etc.

Supervisor's signature: _____ Date: _____

RETURN FORM DIRECTLY TO RESIDENT BOX 454 by March 31, 2025