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Group member assessment form (Confidential)

Do not discuss the completion of, or information on, this form with any other group member of your own or any other group.

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| **Group** | Team ASK |
| Name of individual being assessed: | | | Kenny |

Please tick the relevant box:

|  |  |
| --- | --- |
| **This is me**  **This is another group member** |  |
|  |

|  |  |  |
| --- | --- | --- |
| **Did this group member make a contribution to the project?** (circle) | **Yes** | **No** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Criteria** | **-2** | **-1** | **0** | **+1** | **+2** | **Comment** |
| Organisation |  |  |  |  |  | Is the person organised or disorganised? |
| Good team member |  |  |  |  |  | Co-operative? Did this team member listen to suggestions, make helpful comments, carry out allotted tasks or where they unreasonable or lazy? |
| Ideas and suggestions |  |  |  |  |  | Relevant? Practical? Novel? |
| Research for the project |  |  |  |  |  | Scant? Good range of relevant information? |
| Attendance in project labs/meetings |  |  |  |  |  | Good/poor attendance? |
| Encouragement & motivation |  |  |  |  |  | Encouraging? Inspirational? Depressing? Neutral? Bullying? |
| Grasp of the project |  |  |  |  |  | Poor? Distracted? Baffled? Incisive? Good grasp of what was required? |
| Overall contribution |  |  |  |  |  | Poor expression? Most/no contribution? Worked well? |

Tick the relevant box for the score for each of the criteria

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Key: | -2 | | | = | Very poor or absent from the category in question |
|  | -1 | | | = | A slight negative influence in the group for the category |
|  | 0 | | | = | Average, neither particularly good nor bad |
|  | +1 | | | = | Positive influence |
|  | +2 | | | = | Exceptionally good contribution or influence |
|  |  | | |  |  |
| Note: | | 1. | Only use +2 or –2 for the exceptionally good or bad, and 0 for average. | | |
|  | | 2. | **This must be an objective, professional, judgement relating to the work of the individual and NOT related to your *personal* opinion of the individual.** | | |
|  | | 3. | **Hand in completed group member assessments with your final project report.** | | |
|  | | 4. | If you make any errors in the boxes, circle the incorrect tick mark and tick the correct box. | | |