



Performance Review of AmeriCorps*VISTA Supervisor



VISTA Member's Name:	Review Period	
Title/Assignment Area:	From Date:	
Project Site:	To Date:	
Supervisor's Name:		

E-mail or fax a copy of this completed and signed form to the VISTA Project Coordinator.

Please score each review item on a scale of 0 - 4.	
0 = N/A, 1=Needs Improvement, 2 =Satisfactory, 3=Good, 4=Excellent	
SUPERVISION	SCORE
Holds me accountable to the VISTA Assignment description (VAD).	
Checks in periodically on how work is going, meeting with me to review recently completed projects, explaining goals and outputs for upcoming projects, and letting me ask any questions.	
Makes sure my workload is manageable.	
Gives me sufficient time to complete my assignments.	
Explains his/her supervision style to me and his/her interaction with staff and others.	
Makes sure that I am not engaged in prohibited activities.	
Recognizes my unique contributions.	
Monitors and tracks my progress toward the VISTA assignment goals.	
Ensures and encourages my attendance at required monthly meetings and trainings.	
SECTION TOTAL:	
LEADERSHIP	
Demonstrates the ability to direct me in accomplishing service activities.	
Communicates the AmeriCorps mission to others.	
Demonstrates clear understanding of and complies with AmeriCorps*VISTA requirements.	
Provides me with the resources I need to complete service activities (e.g., office, equipment, supplies, funding if necessary).	
Advocates for me (makes sure I meet the right people, makes sure my work is being valued and recognized, includes me as an integral member of the organization, ensures others in the organization support and encourage me, etc.).	
Helps me understand the goals and initiatives of the organization.	
Helps me connect the purpose of my work with the organization's vision for its future.	
Helps me keep sustainability in mind when completing service activities.	
Fosters and encourages an enthusiastic and optimistic attitude.	
Motivates me.	
Provides adequate orientation and training opportunities for me.	
SECTION TOTAL:	
COMMUNICATION	
Ensures I am aware of news, information, and/or procedures.	
Encourages me to give input/feedback.	
Responds appropriately to my feedback and suggestions for improvement of services/programs.	
Gives me adequate praise/constructive feedback.	
Encourages me to be innovative.	
Challenges me to grow.	
Facilitates my learning.	
Clarifies questions related to the assignment.	
Allows me to explain my needs.	

Explains expectations and tasks clearly.	
Is willing to listen to me.	
SECTION TOTAL:	
ACCESSIBILITY/AVAILABILITY	
Lets me know where, when, and how he/she can be reached.	
Makes himself/herself available for brainstorming and assisting with projects.	
Considers my individual needs.	
SECTION TOTAL:	
OVERALL SCORE TOTAL:	

ADDITIONAL QUESTIONS

What are your site supervisor's greatest strengths?

What additional support do you need from your site supervisor?

VISTA Member's Signature: _____
Current Date: _____

VISTAs, if you shared your responses with your supervisor, please have him/her complete the section below.

SUPERVISOR'S RESPONSE

My signature below acknowledges that I have received a copy of and understand this assessment and does not necessarily indicate my agreement with its contents.

Supervisor's Signature: _____
Current Date: _____