

NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION
ROTATIONAL ASSIGNMENT PROGRAM
HOST OFFICE EVALUATION OF PARTICIPANT

Participant's Name _____

Title and Grade _____

Office of Record _____

Title of Assignment _____

Host Office _____

Host Office Sponsor _____

Was the assignment completed? YES ___ NO ___ If no, explain.

Were objectives and expectations for the finished product met?
YES ___ NO ___ If no, explain.

Briefly explain the following:

- the developmental experience gained by the participant. If none gained, explain why not.

- quality of participant's work - may use quantitative as well as performance range (e.g. average, excellent, outstanding, etc.)

- your recommendation as to how the participant could benefit from other developmental assignments.

Printed Name and Title _____

Signature _____ Date _____