

FACILITY & OPERATION EMPLOYEE EVALUATION

DATE: _____

NAME: _____ Building: _____
Last, First

Position held by the staff being evaluated: _____

Type of Evaluation: Seniority Trial Period Probationary

Please describe in narrative fashion the employee's level of effectiveness in each of the job criteria listed below.

Job knowledge: (Demonstrates required knowledge for position, including equipment use and maintenance)

Quality and quantity of work: (Ability to complete assignments thoroughly, extra effort when needed)

Work Habits: (Attendance, punctuality, dependability)

Interpersonal Skills: (Relationships with students, staff & supervisors)

Personal Qualities: (Judgment, initiative, professionalism, self-control)

Supervisory Ability: (Leadership, fairness, organizational skills)

Based on your observations, please list areas of performance responsibility where this employee is particularly effective:

1. _____
2. _____
3. _____

Based on your observations, please list areas of job performance that could be improved:

1. _____
2. _____
3. _____

Briefly describe suggested course of action for improvement and indicate the date of re-evaluation conference.

Date of Re-Evaluation Conference: _____

Submit memorandum describing noted improvement to the Department of Human Resources at conclusion of re-evaluation conference.

Overall Evaluation Rating for this Employee's Job Effectiveness

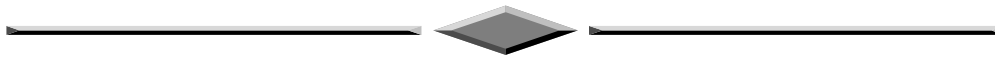
- Meets expectations Exceeds expectations Needs improvement
 This employee is not effective in meeting job responsibilities.

Signature of Supervisor

Date

Signature of Building Administrator

Date



TO BE COMPLETED BY THE EMPLOYEE:

- I have reviewed this evaluation report with my supervisor and have been given a copy.
 I will attach a personal statement to this evaluation within ten (10) days of the evaluation conference.

The presence of the employee's signature indicates that the evaluation form has been reviewed by the employee. It does not imply agreement with the evaluation.

Signature of Employee

Date

Distribution:

Employee
Immediate Supervisor
Building Administrator
Employee's Personnel File (original)