Performance Evaluation for Classified Employees

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| --- | --- | --- | --- | --- |
| **Evaluation Status:**[ ]  3-month Probationary[ ]  6-month Probationary[ ]  Annual for Year:      [ ]  Other:       | Name: |       | Grade |       |
| State Title: |       |
| Working Title: |       |
| Department: |       |
| Anniversary Date in College Service: |       |
| Anniversary Date in Working Title: |       |
| **Part A** |
| **Definition for Rating to be Applied** |
| * **Commendable:** Accomplished all goals or performs all tasks and excels in a substantial manner
* **Above Standard:** Performs all tasks above departmental standards
* **Competent:** Meets departmental Standards
 | * **Needs Improvement:** Below average performance but improving and potentially acceptable.
* **Unacceptable:** Many goals unrealized or many tasks not performed.
* **Not Applicable:** Not applicable to job
 |
| *Specific examples must be cited in the space provided for comments.* |
|  |
| **A.1 Quality and Quantity of Work:** | ***Commendable*** | ***Above Standard*** | ***Competent*** | ***Needs Improvement*** | ***Unacceptable*** | ***Not Applicable*** |
| A. | Demonstrates knowledge of job | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| B. | Performs work with accuracy | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| C. | Work is neat and presentable. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| D. | Work is thorough. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| E. | Organizes work appropriately. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| F. | Appropriate amount of work accomplished: | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Supervisor’s Comments:**       |
| **Employee’s Comments:**       |
| **A.2 Work Habits** | ***Commendable*** | ***Above Standard*** | ***Competent*** | ***Needs Improvement*** | ***Unacceptable*** | ***Not Applicable*** |
| A. | Is regular in attendance at work. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| B. | Observes established working hours. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| C. | Completes work on time. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| D. | Demonstrates the ability to work without immediate supervision. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| E. | Complies with departmental and college policies. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| F. | Complies with instructions, rules, and regulations, including health and safety precautions. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Supervisor’s Comments:**       |
| **Employee’s Comments:**       |
| **A.3 Work Attitudes** | ***Commendable*** | ***Above Standard*** | ***Competent*** | ***Needs Improvement*** | ***Unacceptable*** | ***Not Applicable*** |
| A. | Endeavors to improve work techniques. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| B. | Accepts new ideas and procedures. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| C. | Accepts constructive criticism and suggestions. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| D. | Accepts responsibility. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| E. | Exercises judgment. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| F. | Adapts to emergency situations. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Supervisor’s Comments:**       |
| **Employee’s Comments:**       |
| **A.4 Professional Relationships** | ***Commendable*** | ***Above Standard*** | ***Competent*** | ***Needs Improvement*** | ***Unacceptable*** | ***Not Applicable*** |
| A. | Works well with co-workers. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| B. | Works well with the public. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| C. | Cooperates with supervisors and other staff members. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| D. | Observes established channels of communication. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Supervisor’s Comments:**       |
| **Employee’s Comments:**       |
|  |
| **A.5 Supervisory Ability** *(where applicable)* | ***Commendable*** | ***Above Standard*** | ***Competent*** | ***Needs Improvement*** | ***Unacceptable*** | ***Not Applicable*** |
| A. | Demonstrates leadership ability. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| B. | Makes timely decisions. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| C. | Works effectively in a team environment. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| D. | Trains and instructs subordinates. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| E. | Maintains acceptable performance standards among employees. | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Supervisor’s Comments:**       |
| **Employee’s Comments:**       |
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| **Part B** |
| **Comments of Departmental Supervisor who Performed this Evaluation** |
| **Probationary 3-month and 6-month Evaluation:**[ ]  Retention[ ]  Dismissal | **Annual or Other Evaluation:**[ ]  Retention[ ]  Dismissal |
| **Comments of Departmental Supervisor:**       |
|  |  |       |
|  | *Signature Departmental Supervisor* | *Date* |
|  |       |
|  | *Title of Departmental Supervisor* |
|  |
| **Comments of Employee:**       |
|  |
|  |  |       |
| *Employee Signature* (Does not imply agreement or disagreement with evaluation) | *Date of discussion with Supervisor* |
|  |
| **Part C** |
| **Comments of Intermediate Supervisor and/or Chief Human Resources Officer who Reviewed this Evaluation** |
| **Probationary 3-month and 6-month Evaluation:**[ ]  Retention[ ]  Dismissal | **Annual or Other Evaluation:**[ ]  Retention[ ]  Dismissal |
| **Comments of Intermediate Supervisor and/or Chief Human Resources Officer:**  |
|  |  |  |
| *Signature* | *Date* |
|  |
| **Comments of Employee:**       |
|  |  |       |
| *Employee Signature* (Does not imply agreement or disagreement with evaluation) | *Date* |