



**STAFF
PERFORMANCE APPRAISAL FORM**

Employee's Name (Last, First, Middle)			
Position Title		Time in Present Position (in months)	
Department:		Type of Rating (Mark X below)	
		Annual	Probationary
Rating Period	Evaluator's Name		Evaluator's Title

The primary purpose of this performance appraisal is to enhance and strengthen employee job performance by improving supervisor-employee communication through encouragement of individual growth and development. The goal of this process is to improve the effectiveness of the employee, the supervisor, the department, and the College.

The original appraisal form goes to employee for self-evaluation at least 10 working days prior to returning to evaluator. The evaluator then takes no more than 10 working days to evaluate the employee. Once the form is completed, a meeting should be scheduled to discuss the appraisal and employee goals. The evaluation period should include the one year period prior to appraisal.

1. KNOWLEDGE OF WORK

Select the statement which best describes how well the employee demonstrates the knowledge and skills needed to perform assigned duties. If appropriate, consider ability to organize the workload.

Evaluator

Employee

- Displays outstanding knowledge, skills, and mastery of all phases of work performance
- Displays above-average knowledge, skills, and competence in all aspects of work
- Has adequate knowledge and skill of work
- Has basic knowledge but must acquire greater skills in some areas
- Shows very little knowledge or skill in work performed.....

Comments/Recommendations _____

Comments/Recommendations _____

2. QUALITY OF WORKING RELATIONSHIPS (Civility & Tolerance)

Select the statement which best describes the employee's ability to work and interact with others.

Evaluator

Employee

- Demonstrates excellent working relationship skills
- Displays good working relationship skills
- Usually responds to the needs of others
- Inconsistent in level of cooperation.....
- Has difficulty working with others

Comments/Recommendations _____

Comments/Recommendations _____

3. QUALITY OF WORK (Excellence)

Select the statement which best describes the degree to which the employee meets standards of accuracy, effectiveness, and other requirements pertinent to assigned duties.

Evaluator

Employee

- Demonstrates outstanding accuracy, quality, and dependability in work performed regardless of volume.
- Demonstrates above average accuracy and quality work, infrequent errors or rejections
- Usually performs acceptable work which seldom needs corrected.....
- Somewhat frequently produces unacceptable work with frequent errors or rejections.....
- Performs unsatisfactory work consistently with excessive errors or rejections

Comments/Recommendations _____

Comments/Recommendations _____

4. EFFICIENCY

Select the statement which best describes employee's ability to complete job assignments in a timely manner.

<u>Evaluator</u>	<u>Employee</u>
<input type="checkbox"/> <i>Consistently accomplishes work in an efficient and expeditious manner</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Accomplishes what is required in an efficient manner</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Usually completes work assigned in a reasonable, well-planned manner</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Seldom completes work assigned, although some planning is evident</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Seldom completes work assigned, no planning evident</i>	<input type="checkbox"/>
Comments/Recommendations _____	Comments/Recommendations _____
_____	_____
_____	_____

5. PROBLEM SOLVING (Fairness and Integrity)

Select the statement which best describes the employee's ability to plan, make logical decisions, and offer sound suggestions

<u>Evaluator</u>	<u>Employee</u>
<input type="checkbox"/> <i>Shows unusual ability to make sound decisions</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Recognizes the need to make decisions and makes them independently</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Makes appropriate job-related decisions</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Exercises little judgment</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Needs facts interpreted</i>	<input type="checkbox"/>
Comments/Recommendations _____	Comments/Recommendations _____
_____	_____
_____	_____

6. INITIATIVE (Freedom & Responsibility)

Select the statement which best describes how well employee exhibits the ability to carry out responsibilities without direct supervision.

<u>Evaluator</u>	<u>Employee</u>
<input type="checkbox"/> <i>Self-starter who goes out of his/her way to accept responsibility, and works well without direct supervision</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Needs minimal supervision</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Usually performs necessary tasks with some supervision</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Needs frequent supervision and reorientation to work goals</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Requires constant supervision</i>	<input type="checkbox"/>
Comments/Recommendations _____	Comments/Recommendations _____
_____	_____
_____	_____

7. ATTENDANCE AND PUNCTUALITY

Select the statement which best describes employee's practice of attending work regularly, on time, and staying on the job until the end of the day.

Evaluator

Employee

- Satisfactory.....
-Unsatisfactory; needs improvement

Comments/Recommendations _____

Comments/Recommendations _____

8. COMMUNICATION SKILLS

Select the statement which best describes employee's ability to express himself/herself and how well he/she receives information.

Evaluator

Employee

- Satisfactory
-Unsatisfactory; needs improvement

Comments/Recommendations _____

Comments/Recommendations _____

9. APPEARANCE

Select the statement which best describes the employee's appearance appropriate to their position.

Evaluator

Employee

-Satisfactory
-Unsatisfactory; needs improvement

Comments/Recommendations _____

Comments/Recommendations _____

10. LEADERSHIP SKILLS

Select the statement which best describes the employee's leadership skills.

Does not apply.

Evaluator

Employee

-Provides clear direction and purpose and empowers subordinates to achieve objectives ..
-Effectively coaches and motivates subordinates
-Possesses adequate ability to lead
-Has limited success with leading a unit
-Is not an effective leader.....

Comments/Recommendations _____

Comments/Recommendations _____

11. SUPERVISORY ABILITY

Select the statement which best describes how well the employee carries out his/her supervisory responsibilities.

Does not apply.

Evaluator

Employee

-Demonstrates outstanding supervisory skills and functions at high level of effectiveness.....
-Supervises well. Organized and effective.....
-Possesses adequate ability to supervise.....
-Has limited success with supervision
-Does not supervise effectively.....

Comments/Recommendations _____

Comments/Recommendations _____

12. MANAGEMENT ABILITY

Select the statement which best describes how well the employee manages his/her unit.

Does not apply.

Evaluator

Employee

-Demonstrates excellent management skills and achieves a high level of performance from subordinates.....
-Well organized with effective management skills.....
-Possesses adequate ability to manage his/her unit
-Has limited success with managing his/her unit
-Does not manage subordinates effectively.....

Comments/Recommendations _____

Comments/Recommendations _____

13. WORK ENVIRONMENT

Select the statement which best describes how well the employee promotes and maintains a healthy work environment.

Does not apply.

Evaluator

Employee

-Demonstrates outstanding ability to build a team with high morale and clear focus.....
-Effective in developing a strong team atmosphere.....
-Possesses adequate ability to maintain a good work environment.....
-Has limited success with team building
-Does not effectively promote a healthy work environment.....

Comments/Recommendations _____

Comments/Recommendations _____

14. OVERALL EVALUATION

Select the statement which best describes the overall performance of employee.

Evaluator

Employee

<input type="checkbox"/> <i>Excellent</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Above Average</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Average</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Poor</i>	<input type="checkbox"/>
<input type="checkbox"/> <i>Unsatisfactory</i>	<input type="checkbox"/>

Comments/Recommendations _____

Comments/Recommendations _____

My performance appraisal has been reviewed and discussed with my supervisor. I have been advised of how to make improvements in the areas indicated in comments and goals.

Employee Signature

Date

OPTION:

I have read and discussed this performance evaluation with my supervisor, however I do not agree with this evaluation in its entirety.

Employee Signature

Date

Comments:

After carefully considering this employee's performance, I am presenting a fair and impartial appraisal. The employee has been advised of how to make improvements in areas needed.

Evaluator's Signature

Date

Area Head Signature

Date