

## FERRIS STATE UNIVERSITY – DINING SERVICES EMPLOYEE PERFORMANCE EVALUATION

NAME:

DEPARTMENT:

CLASSIFICATION:

EVALUATION DATE:

The supervisor's opinion of the employee's performance should be indicated on the scale as objectively as possible. The evaluation must be reviewed and discussed with the employee.

### READ ENTIRE ATTACHED INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Rating Factors: Consider each factor separately and independently. Base your rating on observable and proven performance.

Outstanding: (O) Indicates an extremely exceptional level of job performance.

Very Good: (V) Performance is beyond normal requirements and competence.

Satisfactory: (S) Fulfills the normal job requirements with some strong points.

Needs Improvement: (N) Performance is below job requirements, but improvement is anticipated.

Unsatisfactory: (U) Job performance level shows a significant limitation that must be improved substantially to be acceptable.

**Any rating of U, N or O must be explained/documentated in the "Comments" section.**

When appropriate, write in "Comments" section(s), "No opportunity to observe".

**QUANTITY OF WORK:** Consider Achievements resulting from personal effort. Also completion of assignments.

O  V  S  N  U

Comments:

**QUALITY OF WORK:** Consider accuracy, thoroughness, usability, and dependability of results.

O  V  S  N  U

Comments:

**JOB KNOWLEDGE:** Understanding of objectives, duties and responsibilities gained through education, training and experience.

O  V  S  N  U

Comments:

**INITIATIVE AND ORGANIZATION:** Ability to be self-starting, efficient, resourceful and creative toward job objectives, duties and responsibilities.

O  V  S  N  U

Comments:

**ATTITUDE AND COOPERATION:** Ability and willingness to cooperate with supervisors, co-workers and others, follow directions and rules, accept constructive criticism and exhibit good judgment.

O  V  S  N  U

Comments:

**DEPENDABILITY:** Consider regularity of attendance, punctuality, and attention to use of rest periods. Also, meets deadlines.

O  V  S  N  U

Comments:

**CAPACITY TO DEVELOP:** Consider the potential to develop skills, improve job performance and assume more responsibility.

O  V  S  N  U

Comments:

**OVERALL EMPLOYEE EVALUATION:** Consider the employee's total job performance.

O  V  S  N  U

Comments:

An overall rating "NEEDS IMPROVEMENT" or "UNSATISFACTORY" requires written documentation to be included with this evaluation.

A follow-up evaluation for employees rated "NEEDS IMPROVEMENT" or "UNSATISFACTORY" is normally required within 90 days. The follow-up review is scheduled for \_\_\_\_\_

SUPERVISOR'S COMMENTS:

EMPLOYEE'S COMMENTS:

I certify that this evaluation was reviewed with me by my supervisor. My signature does not necessarily indicate my concurrence.

\_\_\_\_\_  
EMPLOYEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEPARTMENT ADMINISTRATOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
EVALUATOR

\_\_\_\_\_  
DATE

**NOTE: All completed, signed performance evaluation must be sent to the Human Resource Office (Prakken 150).**