

# Employee Evaluation

City of Rexburg



CITY OF  
**REXBURG**  
America's Family Community

35 North 1st East  
Rexburg, ID 83440

www.rexburg.org

Phone: 208.359.3020  
Fax: 208.359.3022

Employee: \_\_\_\_\_ Position: \_\_\_\_\_  
 Employee Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Appraisal Period: From: \_\_\_\_\_ To: \_\_\_\_\_

**INSTRUCTIONS:** This form is designed as an annual review to provide a progress report to employees regarding their performance. The form is appropriate for those employees requiring a supplemental review during the year. Below are listed several key competencies required for City employees. Review the employee's performance in each area and provide a brief description of his/her progress. Identify what goals, if any, are required over the next 12 months. At the end, ensure that both supervisor and employee sign the form, indicating that the progress report was delivered.

GENERAL COMPETENCIES						
Rating	JOB SPECIFIC PERFORMANCE					TRAINING PLAN
	1	2	3	4	5	
Greeting customers at counter and phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interpersonal Relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Judgment & Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quantity, Quality & Timeliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electronic Utility Payment Entry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Forms house keeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reconcile Cash Drawers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Coding revenue receipts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**GOALS & OBJECTIVES FOR COMING YEAR**

**DEVELOPMENTAL ACTIVITIES**

**EMPLOYEE COMMENTS**

**SUPERVISOR COMMENTS**

<b>Overall Progress Rating</b> <i>Mark with an "X" under the appropriate rating</i>	<b>Unsatisfactory</b> <i>Does not meet job requirements.</i> 1	<b>Marginal</b> <i>Little progress shown.</i> 2	<b>Needs Improvement</b> <i>Some progress shown.</i> 3	<b>Satisfactory</b> <i>Good progress shown.</i> 4	<b>Excels</b> <i>Progress exceeds expectations.</i> 5
--	--	---	--	---	---

**EMPLOYEE SIGNATURE**

I have seen and reviewed the appraisal. All items covered have been discussed fully with me. I have been encouraged to make comments. I realize that my signature does not imply that I am in agreement with the appraisal, but only that I have received and understand it.

**Employee Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_

**Supervisor Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_