



CLASSIFIED PERFORMANCE APPRAISAL

Employee: _____	Position: _____
Department: _____	Supervisor: _____
District Location: _____	Appraisal Due Date: _____
Appraisal Period (check one): <input type="checkbox"/> 3 months <input type="checkbox"/> 5 months <input type="checkbox"/> Annual <input type="checkbox"/> Interim	

COMPLETE THE FOLLOWING SECTION USING THE RATINGS LISTED BELOW

<u>ES</u>	Exceeds Standards	Work performance is consistently superior to standards required for the job. Results far surpass expectations.
<u>MS</u>	Meets Standards	Work performance consistently meets the standards of performance for the position.
<u>IN</u>	Improvement Needed	Work performance does not consistently meet the standards of performance for the position. Serious effort is needed to improve performance.
<u>D</u>	Does Not Meet Standards	Work performance is inadequate and inferior to the standards of performance required for the position. Performance at this level cannot be allowed to continue.
<u>NA</u>	Not Applicable	Performance is not required in specific rating factor. Results cannot be measured.

WORK PERFORMANCE

Skills and Abilities: has appropriate knowledge as it relates to specific job responsibilities. As new ideas or technologies are introduced, is able to learn and use them appropriately.

Rating: **Comments:**

Knowledge of Work: Understands all aspects of work, possesses technical skill, is well informed and educated in performing to the level expected for the job.

Rating: **Comments:**

Quality of Work: work reflects attention to detail, is accurate, thorough, and of professional quality.

Rating: **Comments:**

Quantity of Work: routinely meets established goals relative to the amount of acceptable and timely work provided.

Rating: **Comments:**

Dependability: demonstrates reliability in following through on assignments; meets deadlines; is available, and can be counted on to overcome obstacles for consistent performance; is personally accountable for actions.

Rating: **Comments:**

Service-Centered Work: regularly seeks to provide quality service to achieve customer satisfaction; has understanding of customer needs; uses tact and diplomacy when handling difficult customer service situations.

Rating: **Comments:**

Organizational Skills: efficient work practices and time management; organizes, plans and forecasts work skillfully; work area is orderly and well maintained.

Rating: **Comments:**

Safety and Health Observance: regularly attentive to safety and health regulations as related to the position.

Rating: **Comments:**

BEHAVIOR/WORK HABITS

Attendance and Punctuality: adheres to work days and hours; demonstrates promptness and is regularly present.

Rating: **Comments:**

Attitude and Cooperation: makes a positive contribution to morale; assists others and shows sensitivity to and consideration for others' feelings; accepts constructive criticism positively; shows pride in work.

Rating: **Comments:**

Communication Skills: communicates knowledge clearly, accurately and thoroughly; listens attentively and responds thoughtfully to needs, goals and aspirations.

Rating: **Comments:**

Initiative: sees when something needs to be done and does it; offers suggestions to improve work process and the environment; helps out to achieve the overall goals of the department/division; demonstrates commitment to self-improvement.

Rating: **Comments:**

Interpersonal Skills: maintains positive relationships with others; handles conflict well and respects diversity.

Rating: **Comments:**

Operating Procedures: adheres to operating policies and guidelines, health and safety/work injury procedures.

Rating: **Comments:**

Judgment: analyzes problems skillfully; careful consideration of alternatives and impacts of decisions; effective use of resources, effective handling of ambiguous situations.

Rating: **Comments:**

Teamwork: works effectively and collaboratively with others; participates and makes positive contributions to the team's effort.

Rating: **Comments:**

ADDITIONAL COMMENTS

A. Noteworthy Accomplishments

B. Areas in Need of Improvement

ACTION PLAN: _____ Required _____ Not Required
(separate document)

Supervisor Signature

Date

EMPLOYEE COMMENTS

Employee Signature

Date

Your signature indicates neither agreement nor disagreement with the content of the evaluation; however, it does indicate that you have read the evaluation, and that it has been discussed between you and your supervisor.