

**ORANGE COUNTY
PERFORMANCE EVALUATION**

Employee Number _____

Employee _____ Hire Date _____ Position _____

Period Covered: From: _____ To: _____ Department: _____

1. Performance Ratings

Using the following performance factors, **enter the number in the box** that best relates to the employee's performance Level during the review period. Ratings of **1** or **5** must be clarified by specific examples. **Comments should be made in each section.**

1-Unsatisfactory 2-Below Satisfactory 3-Satisfactory 4-Above Satisfactory 5-Exceptional

A. Job Knowledge

Knows skills, abilities, and techniques needed to complete job tasks. Knows how the job fits in the department & affects others. Knows how to effectively work with others.

B. Quality of Work

Meets established standards for tasks to be performed. Meets objectives for the task or mission assigned to the organization.

C. Quantity of Work

Completes work assigned or amount expected of position. Knows when and how to work with others when required. Conforms to assigned schedules and deadlines.

D. Dependability

Completes work according to procedures, guidelines, and goals. Takes responsibility for completing work. Works toward deadlines and schedules.

Employee Name _____

E. Attendance

Able to effectively forecast absences. Has no unexcused absences. Can be relied on to be at the designated place of work.

F. Initiative and Attitude

Knows what needs to be done and does it. Has a positive attitude and contributes to organizational morale. Does not complain about work or work environment.

G. Judgment

Follows correct procedures. Chooses correct procedure or best alternative to follow. Looks at pros, cons, and impact of decisions before deciding.

H. Cooperation

Listens to instructions and tries to do the work as directed. Willing to do unpleasant tasks.

I. Customer Service and Communication

Shares information and keeps supervisor informed of work status. Gets along with others in the work unit. Provides good service to customers and the public.

J. Coordination of Work

Realistically and accurately estimates the time a job will take and schedules work accordingly. Avoids having to redo work in order to get task accomplished. Uses supplies, materials, equipment and time efficiently.

Employee Name _____

K. Safety and Work Place Environment

Keeps work area clean and organized. Maintains appropriate work area appearance. Follows safety rules and procedures. Takes responsibility for the safety of others.

SUM OF PERFORMANCE RATINGS OVERALL RATING _____

50-55 and no ratings below satisfactory - Exceptional
39-49 and no ratings below satisfactory - Above Satisfactory
30-38 and no unsatisfactory ratings - Satisfactory
17-29 - Below Satisfactory
0-16 - Unsatisfactory

2. Development and growth Potential:

Include comments on employee's major strengths, accomplishments made during this review period and development achieved since the last performance evaluation.

3. Completed Goals and Objectives:

Review the results of goals and objectives completed within this performance cycle.

4. New Goals and Objectives:

List the objectives to be accomplished within the next performance cycle. Arrange in order of priority.

Employee Name _____

5. Additional Comments by Rating Official:

6. Comments by Rated Employee:

7. Constitutional Officer/Department Director's Assessment:

I do / do not (circle one) recommend a merit pay increase in the amount of \$ _____.

Comments: _____

8. Authentication: (Employee's signature acknowledges that the performance evaluation has been reviewed with the rating official. It does not indicate agreement with the rating.)

Employee	_____	Date	_____
Rating Official	_____	Date	_____
Const Officer/Dept Dir	_____	Date	_____

9. Approval:

Merit Pay Increase (if any) \$ _____

County Administrator _____ Date _____