

<b>REPORT OF CLASSIFIED EMPLOYEE PERFORMANCE</b>	<b>SHASTA COUNTY OFFICE OF EDUCATION</b>
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NAME
EMPLOYEE ID
DEPARTMENT
CLASSIFICATION

FROM:	TO:
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RATING PERIOD

Type of Evaluation:

 ANNUAL

 SPECIAL

	1st 3 Month Probationary Evaluation
	2nd 3 Month Probationary Evaluation
	Final Probationary Evaluation

<b>SECTION A</b>	<b>RATING KEY</b>	<b>SECTION D</b>	Record specific <b>REQUIRED IMPROVEMENT</b> or <b>CORRECTION</b> needed in performance or behavior.
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PC = PROFICIENT & COMPETENT  
 PR= PROGRSSING TOWARDS PROFICIENT & COMPETENT  
 ND = NEEDS DEVELOPMENT  
 U = UNACCEPTABLE  
 NA = NOT APPLICABLE

Please check the appropriate box below.

	PC	PR	ND	U	NA	
1						Observance of Work Hours
2						Attendance
3						Appropriate Attire and Grooming
4						Safety Practices
5						Operation and Care of Equipment
6						Job Knowledge
7						Job Skills
8						Adaptability and Flexibility
9						Impact
10						Quality of Work
11						Planning and Organizing
12						Problem Solving and Decision Making
13						Initiative
14						Oral Communication
15						Written Communication
16						Interpersonal Skills
17						Customer Service
18						Team Orientation

<b>SECTION E</b>	Record <b>GOALS</b> established for next performance period.
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<b>SECTION F</b>	For <b>PROBATIONARY EMPLOYEES:</b>
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1 Year Probationary     3 Months     6 Months     Final Probationary

Promotional Probationary     6 Months

**Permanent Status Recommended** (To be determined in conjunction with final probationary evaluation.)

**Permanent Status Not Recommended** (To be determined not later than the final probationary evaluation in accordance with the INSTRUCTIONS FOR COMPLETION on Page 1.)

<b>SECTION B</b>	Record <b>JOB STRENGTHS</b> & proficient performance (See Page 2 for more space, if necessary)
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<b>EVALUATOR:</b>
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(Signature) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date) \_\_\_\_\_

<b>REVIEWING MANAGER/DIRECTOR:</b>
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(Signature) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date) \_\_\_\_\_

**EMPLOYEE ACKNOWLEDGEMENT:** This report has been discussed with me. I understand my signature does not necessarily indicate agreement. (Attach additional sheets if necessary to record comments.)

<b>SECTION C</b>	Record <b>PROGRESS ACHIEVED</b> in attaining goals established during current rating period.
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<b>EMPLOYEE:</b>
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(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

<b>EMPLOYEE COMMENTS:</b>
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NAME

EMPLOYEE ID

DEPARTMENT

CLASSIFICATION

FROM:		TO:	
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RATING PERIOD

Type of Evaluation:

<input type="checkbox"/>	ANNUAL
<input type="checkbox"/>	PROBATIONARY
<input type="checkbox"/>	SPECIAL

<b>SECTION B (continued)</b>	Record <b>JOB STRENGTHS &amp;</b> proficient performance
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<b>SECTION C (continued)</b>	Record <b>PROGRESS ACHIEVED</b> in attaining goals established during current rating period.
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<b>SECTION D (continued)</b>	Record specific <b>REQUIRED IMPROVEMENT</b> or <b>CORRECTION</b> needed in performance or behavior.
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<b>SECTION E (continued)</b>	Record <b>GOALS</b> established for next performance period.
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<b>EMPLOYEE COMMENTS (continued)</b>
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**SHASTA COUNTY OFFICE OF EDUCATION  
REPORT OF CLASSIFIED EMPLOYEE PERFORMANCE EVALUATION PROCESS**

**RATING KEY**

**PC = PROFICIENT & COMPETENT**

Consistently demonstrates **PROFICIENCY and is COMPETENT** in the execution of the majority of critical job responsibilities and objectives; makes important contributions to the overall functioning of a unit/dept/div by demonstrating solid performance with respect to productivity and quality of work and possesses strong skills and knowledge; is a strong team player who maintains and promotes good working relationships.

**PR = PROGRESSING TOWARD PROFICIENT AND COMPETENT**

Overall performance is progressing toward a proficient and competent level. Employee demonstrates proficiency and competency in some of the critical job responsibilities and objectives; employee is continuing to work toward proficiency and competency in all critical areas in job responsibilities and objectives, accepts guidance/direction and monitoring, seeks help and advice as needed, and uses available resources effectively.

**ND = NEEDS DEVELOPMENT**

Overall performance **NEEDS DEVELOPMENT** to ensure consistent execution of all job responsibilities and objectives; demonstrates success in some areas but guidance/direction/monitoring in other areas is needed; performance factors/competencies as identified need further development and/or consistent application.\*

**U = UNACCEPTABLE**

Overall performance is **UNACCEPTABLE**; job responsibilities and objectives have not been consistently met; performance requires close monitoring and has not kept pace with requirements; successes have been only occasional or of minimal impact; performance has failed to improve to demonstrate sufficient level of competencies required.\*\*

**NA = NOT APPLICABLE**

**\*NOTE:**

**Performance issues or concerns should be discussed with the Human Resource Services Office PRIOR to meeting with the employee.**