

LAS CRUCES PUBLIC SCHOOLS CAMPUS SECURITY EVALUATION REPORT

Name: _____ Location: _____

Date: _____ Social Security #: _____

S=Satisfactory

U=Unsatisfactory

N/O = Not Observed

Note: The Growth Plan for Improvement may be prepared for any level, but all items marked unsatisfactory require a Growth Plan.

	S	U	N/O
1. Initiates preventive measures to reduce delinquent acts and upholds and enforces school rules, administration instructions and regulations, board policy, and state regulations.			
2. Observes, monitors, and insures student compliance with rules of conduct in all campus areas. Advises students who are in non-compliance and takes appropriate action while respecting the legal rights of all individuals.			
3. Observes and monitors gatherings and movements of groups of students to ensure that the proper school climate is maintained.			
4. Observes, monitors, and reports non-student activity on campus or adjacent locations and takes appropriate action to ensure the educational climate is not disrupted.			
5. Provides supervision and protective security for students, school personnel, buildings and grounds, and others on the school grounds.			
6. Participates as requested in parent conferences.			
7. Prepares and maintains accurate and complete records and reports as required by the district or principal.			
8. Assists in the supervision of school activities and functions as needed			
9. Maintains professional competence through in-service education activities and/or self-selected professional growth activities.			
10. Works cooperatively and maintains professional relationships with district employees and other professionals within specific area of responsibility.			
11. Attends staff meetings as required.			
12. Performs other tasks as requested by supervisors.			
13. Assists in the investigation of criminal acts in the schools.			
14. Assists in regulating traffic and parking on school property.			

Additional Suggestions/Commendations:

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Evaluators Signature Title Date of Conference

I have read this evaluation and have been afforded the opportunity to discuss it with the evaluator.

Date: ____/____/____

Employee's Signature