Employee Name:		Site/Department	
Job Title:	[ ] Permanent [ ] Probationary	If unscheduled report check here [ ]	Due Date:

SECTION A: Checks in column D must be explained in column E.	A OUTSTANDING	B COMPETENT / STANDARDS MEETS	C NEEDS TO IMPROVE	D UNSATISFACTORY	E DOES NOT APPLY
GENERAL SKILLS					
1.Complies with policies, regulations, and procedures.					
2. Maintains a good attendance record.					
3. Observes time/work schedules.					
4. Presents an appropriate appearance.					
5. Uses materials/equipment safely and economically.					
6. Plans, organizes, and prioritizes work effectively.					
7. Relates respectfully and courteously to students.					
8. Responds to needs of community/parents in a professional manner.					
9. Works courteously and relates effectively with fellow employees.					
10. Exhibits ability to work independently.					
11. Accepts change and demonstrates flexibility.					
12. Completes satisfactory volume of quality work within a reasonable time frame.					
13. Demonstrates ability to make independent judgments.					
14. Willingly accepts suggestions/directions.					
15. Shows an interest in self-improvement.					
16. Understands department/school objectives and works to achieve them.					
17. Keeps lines of communication open between self and supervisor.					
ADDITIONAL FACTORS FOR SUPERVISORS					
18. Planning and Organizing.					
19. Training and Instructing.					
20. Judgments and decisions.					
21. Leadership/Supervisory control.					
22. Evaluating subordinates.					
23. Fiscal management.					
24. Productivity.					

SECTION B: Record job STRENGTHS and superior performance.

SECTION C: Record PROGRESS ACHIEVED in attaining previously set goals for improved work performance for personal or job qualifications.

SECTION D: Record specific GOALS OR IMPROVEMENT PROGRAMS to be undertaken during the next evaluation period.

SECTION E: Record specific work performance DEFICIENCIES or job behavior requiring improvement or correction. Explain checks in Column D.

SUMMARY EVALUATION - Check overall performance*
[ ] Outstanding [ ] Needs to Improve
[ ] Competent/Meets Standards [ ] Unsatisfactory

***An overall rating below "Competent/Meets Standards" will NOT be forward to employee's Personnel File for TEN working days after receipt of his/her copy.**

RATER: ( ) I DO ( ) I DO NOT recommend this employee be granted permanent status.

Signature: Title: Date:

REVIEWER: (If none, so indicate)

Signature: Title: Date:

EMPLOYEE: I certify that this report has been discussed with me. I understand my signature does not necessarily indicate agreement.

Employee's Signature: Date:

COMMENTS:

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