

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	B	C	D	E	SECTION B: <u>Record job STRENGTHS and superior performance.</u>			
GENERAL SKILLS	O U T S T A N D I N G	C M O E M E P E T S E T S N S T T / A N D A R D S	N E E D S O F I M P R O V E	U N E S S E S S A C T O R Y	D O E S N O T A P P L Y	SECTION C: Record PROGRESS ACHIEVED in attaining previously set goals for improved work performance for personal or job qualifications.			
1. Complies with policies, regulations, and procedures.						SECTION D: Record specific GOALS OR IMPROVEMENT PROGRAMS to be undertaken during the next evaluation period.			
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						SECTION E: Record specific work performance DEFICIENCIES or job behavior requiring improvement or correction. Explain checks in Column D.			
1. Successful in completing required competency program						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: _____			
2. Demonstrates the ability to present lessons effectively under the direction of the teacher.									
3. Demonstrates ability to work effectively with students of varying handicapping conditions.									
4. Effectively implements IEP objectives under the direction of the supervising teacher.									
5. Effectively works with regular education teachers and/or community in working with special education students.									
6. Demonstrates ability to effectively manage behavior and positively assist children.									
7. Demonstrates ability to effectively and safely perform specialized medical procedures.									
8. Effectively assists in maintaining a clean and safe environment for students and staff.									
9. Demonstrates competence in standard written and oral language.									

