

PERFORMANCE EVALUATION

(6-01)

QUARTERLY (90 DAY)
 SEMI-ANNUAL
 ANNUAL

EMPLOYEE NAME:	SOCIAL SECURITY NUMBER:	FROM	TO
POSITION:	DEPARTMENT:	LOCATION:	

PERFORMANCE MEASUREMENTS: For each Job Performance Area indicate the employees strong, standard or weak areas by using the listed symbol in the boxes on the left: + (Plus) STRONG ✓ (Check) AVERAGE — (Minus) WEAK	OVERALL PERFORMANCE OF EMPLOYEE: (CHECK ONE) <input type="checkbox"/> OUTSTANDING <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> UNSATISFACTORY
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RATE EACH FACTOR AS FOLLOWS:	O U T S T A N D I N G	S A T I S F A C T O R Y	N E E D S	I M P R O V E M E N T	U N S A T I S F A C T O R Y	BRIEF COMMENTS
1. QUANTITY OF WORK <input type="checkbox"/> Required sum of work is performed daily with minimum supervision <input type="checkbox"/> Task are completed on time and as scheduled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. QUALITY OF WORK <input type="checkbox"/> Accurate <input type="checkbox"/> Thorough and organized <input type="checkbox"/> Communicates and follows oral/verbal and written instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. WORK HABITS <input type="checkbox"/> Clock in/out, on time to/from work/lunch/breaks daily according to work schedule(s) <input type="checkbox"/> Follows and adheres to all rules, regulations and guidelines (i.e. Safety) <input type="checkbox"/> Follows work ethics, directions and instructions with no supervision <input type="checkbox"/> Duties are applied in sequence order, and organized, as part of a daily routine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. PERSONAL RELATIONS <input type="checkbox"/> Respect and establish professional ethics with staff members <input type="checkbox"/> Meets and handles the public in a professional and business manner <input type="checkbox"/> Personal appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. ADAPTABILITY <input type="checkbox"/> Performance in new job duties, functions/assignments and emergencies <input type="checkbox"/> Performs with minimum instruction <input type="checkbox"/> Miscellaneous duties as assigned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. SUPERVISORY ABILITY <input type="checkbox"/> Planning and assigning <input type="checkbox"/> Training and instructing <input type="checkbox"/> Leadership <input type="checkbox"/> Making decisions <input type="checkbox"/> Evaluating performance <input type="checkbox"/> Fairness and impartiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

EMPLOYEES' SIGNATURE	DATE
ADMINISTRATORS' SIGNATURE	DATE
PERSONNELS' SIGNATURE	DATE