Date Due:

Period	to be rev	iewe	d: to		_
Position Title:	Location/Department:				
Supervisor:	Annual []	Probationary [] Other[-	
1. Unsatisfactory (Improvement plan must be attach 2. Requires improvement (Improvement plan must la 3. Meets Expected standards 4. Exceeds Expected standards N/A = Non Applicable A rating of 1 or 2 must have comments and be address receives evaluation rating of 1 or 2, a separate meeting plan and the employee is to be reevaluated in 30 to 9 Employee's comments are to be completed prior to the plan and the employee is to be reevaluated prior to the plan and the employee.	ned) be attached) ssed in an "I ng shall be s 0 calendar d	mprov chedul ays.	ed to discuss the improvement		
Quality of Work – Work is accurate, organized, neat and	d thorough			ЕМР	SPV
Employee Comments:					
Supervisor Comments:					
Improvement Plan if needed (From Improvement P	lan Meetii	ng)			
Quantity of Work – Regularly produces expected volum requirements, and guidelines; uses time effectively.	e of work;	meet	s deadlines, job	ЕМР	SPV
Employee Comments:					
Supervisor Comments:					
Improvement Plan if needed (From Improvement P	lan Meeti	ng)			
Knowledge of Job – Understand all aspects of work, pos and knowledgeable in performing to the level expected for		hnica	Il skill, is well informed	EMP	SPV
Employee Comments:					

Employee Name:

Employee Name:	Date Due:			
	Period to be reviewed:	t	0	
Supervisor Comments:				
Improvement Plan if needed (From I	mprovement Plan Meeting)			
Professional Development/Goals			EMI	SPV
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From I	mprovement Plan Meeting)			
Attendance and Duncturality. Adheres	to would day a and house domana	tuntas nuomantni	FMI	SPV
Attendance and Punctuality – Adheres and is regularly present.	to work days and nours; demons	trates promptin	ess	
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From I	mprovement Plan Meeting)			
Initiative – Is proactive in completing jo	h duties with limited direction from	n the cupervice	EMI	SPV
offers suggestions to improve work proceself-improvement.		•	,	SPV
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From I	mprovement Plan Meeting)			

Employee Name:	Date Due:			
	Period to be reviewed:	_ to		_
Teamwork/Attitude/Working Relationship civility, and respect to all. Establishes and mai		esy,	ЕМР	SPV
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From Improv	vement Plan Meeting)			
Caring Campus – Greets students and staff in or staff; considers students' needs and their pe attentive and responsible to customers' needs a respectful.	rsonal situation when making decisions.	Is	EMP	SPV
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From	vement Plan Meeting)			
'				
Communication – Communicates and present writing.	es ideas clearly and concisely orally and/o	or in	EMP	SPV
Employee Comments:				
Supervisor Comments:				
Improvement Plan if needed (From Improv	vement Plan Meeting)			
'				
Work Habits – Observes District rules and reg and practices; operates equipment and/or vehicles.		olicies	EMP	SPV
Employee Comments:				
Supervisor Comments:				

Employee Name:	Date Due:				
	Period to be re	to			
mprovement Plan if needed (From Improvement Plan Meeting)					
It is the responsibility of the employee a the duties during the evaluation process		compare the job	description with		
I have reviewed the job description and		Supervisor □ YES	Employee □ YES		
This evaluation represents my best judg	ment of this empl	oyee's performa	nce.		
Supervisor:	Date: _				
This report has been discussed with me. agree with all the ratings. I understand response will be attached to my evaluation	that I have the rig	ght to submit a re	esponse; this		
\square I Agree with this evaluation \square I do no	ot agree with this	evaluation			
Employee signature:	Date:				