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| **ANNUAL PERFORMANCE EVALUATION PROGRAM** |
| **Dept. Name:** |  | **Employee Name:** |  |
| **Supervisor Name:** |  | **Employee A#:** |  |
| **Supervisor Title:** |  | **Employee Title:** |  |
| **JOB RELATED COMPETENCIES (Supervisor needs to complete from job description by 6/30.)****Circle which Job related competencies that require a meets rating (up to 2 total).** | **Rating****(4, 3, 2, 1, 0)** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| **6** |  |  |
| **7** |  |  |
| **8** |  |  |
| Comments: |

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| **PERFORMANCE VALUES** **Circle which performance values are required to have a meets rating (up to 2 total).** | **Rating** **(4, 3, 2, 1, 0)** |
| **1** | **Quality of Work:** Accuracy, Thorough, Detailed, Organized, Clean |  |
| **2** | **Work Habits:** Follows Instructions, Utilizes Time and Materials Effectively, Task Completion, Proper Use and Care of University Equipment |  |
| **3** | **Work Schedule & Attendance:** Prompt, Punctual, Absent Only as Approved, Working full scheduled shift |  |
| **4** | **Customer Focused Communication:** Responds to Customers Well, Helpful, Friendly, Communicates Effectively |  |
| **5** | **Teamwork:** Carries Out Tasks/Responsibilities to the End, Cooperates with Other Employees |  |
| **6** | **Policy & Safety Compliance:** Follows University, District, and Safety Policies |  |
| **7** | **Adaptability:** Adjusts Well to Change, Flexible When Necessary |  |
| **8** | **Appropriate Work Place Behavior:** Respectful, Courteous, Uses Appropriate Language, Wears Proper Work Attire |  |
| Comments: |

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| **ANNUAL GOALS (The Supervisor and the Employee write the goals during the Annual Performance Evaluation by 08/15. The Supervisor enters the rating and reviews it with the employee during the following year’s Annual Performance Evaluation by 08/15.)** | **Rating****(4, 3, 2, 1, 0)** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| Comments: |

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| **OVERALL RATING AND SIGNATURE SHEET** |
| Supervisors can make general comments but are required to comment on ratings that are above or below Meets**.** Attach additional sheets and relevant evidence as needed. |
| Final Summation Narrative: |
| **OVERALL RATING** |
| **Far Exceeds****(52-64)**Performance is consistent, of excellent quality, and stands out as truly exceptional. An employee would need to achieve 52-64 points to receive an overall rating of Far Exceeds. | **Exceeds****(38-51)**Performance at a level above expectations. An employee would need to achieve 38-51 points to receive an overall rating of Exceeds. | **Meets** **(30-37)**Performance meets the requirements of the position. An employee would need to achieve 30-37 points and a minimum of meets for the predetermined job related competencies and performance values discussed with the supervisor to receive an overall rating of Meets. | **Partially Meets** **(16-29)**Performance does not meet expectations. An employee would need to achieve 16-29 points to receive an overall rating of Partially Meets.Recommend a Development Plan. | **Not Met****(0-15)**Performance must improve substantially. An employee would need to achieve 0-15 points to receive an overall rating of Not Met.Requires a Performance Improvement Plan. |
|[ ] [ ] [ ] [ ] [ ]
| **Employee Signature:** |  | **Date:** |  |
| **Supervisor Signature:** |  | **Date:** |  |

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| **REBUTTAL** |
| * Rebuttal: If an employee believes the evaluation contains factual errors, or the inadvertent exclusion of necessary information related to the employee’s evaluation, the employee may fill out a rebuttal form. Rebuttals must be precise, yet thoroughly explain what is believed to be factually incorrect or omitted in the evaluation. Supporting documentation should be included. An employee can request a follow-up meeting with their supervisor to present the rebuttal. Rebuttals should be completed by 09/01. Bargaining unit members may seek the assistance of the District Steward or the Chief Steward in writing the rebuttal.
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| Rebuttal: |
| **Employee Signature:** |  | **Date:** |  |
| **Supervisor Signature:** |  | **Date:** |  |