

**SCOE EMPLOYEE EVALUATION  
CLASSIFIED TECHNICAL AND CLERICAL STAFF**

Name:	Position Title:
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Date of Evaluation:	Department:	Worksite:
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Employment Status:

Probationary – 1st Evaluation
  Annual Review  
 Probationary – 2<sup>nd</sup> Evaluation

Check the appropriate box. The expectation levels are based on the job description, office policies and practices and the standards for all like positions. Comments must be made if rating of "Needs Improvement" or "Unsatisfactory" are made.	N/A	Meets Standards	Needs Improvement	Unsatisfactory
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**PERSONAL QUALITIES**

1. Dresses in a professional manner appropriate to job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Dependable – punctual and has regular attendance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Observes limits of designated breaks and lunch periods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Uses good judgment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Shows initiative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Courteous and tactful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Demonstrates flexibility and acceptance of changes in policies and work assignments, and adapts to these changes with a minimum of difficulty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

**JOB PERFORMANCE**

1. Completes assignments and carries out instructions with minimum amount of supervision or further explanation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Completes all work with a high degree of accuracy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Demonstrates knowledge and proper care/use of equipments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Observes health and safety policies and procedures to protect self and others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Recognizes the need for supervisory assistance and accepts guidance and direction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Makes independent decisions and accepts responsibility for own decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Maintains confidentiality required for assigned position.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Exhibits skill at recognizing unique or emergency situations and demonstrates ability to determine proper course of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Schedules and organizes work as to priority so that deadlines are met.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Recognizes departmental priorities and adheres to deadlines, time frames and schedules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Assures that all supplies are available when needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Implements changes as directed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Check the appropriate box. The expectation levels are based on the job description, office policies and practices and the standards for all like positions. Comments must be made if rating of "Needs Improvement" or "Unsatisfactory" are made.	N/A	Meets Standards	Needs Improvement	Unsatisfactory
<b>QUALITY OF WORK</b>				
1. Demonstrates detailed and specific knowledge of area of responsibility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Neatness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Thoroughness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<b>WORK MANAGEMENT</b>				
1. Devises effective solutions to problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Effectively performs assignments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Communicates in a positive, professional and effective manner with multilevel contacts; selects appropriate mode of communication for each situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Communicates effectively in both written and oral modes with multilevel contacts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Displays tact and sensitivity in communications with multilevel contacts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Accurately utilizes available resources, rules and procedures necessary to accomplish tasks in area of responsibility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Provides back-up assistance as required and demonstrates a willingness to work overtime when necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Organizes and maintains work area for maximum efficiency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<b>WORK PRODUCTIVITY</b>				
1. Provides an effective volume of output/efficiency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Meets schedules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<b>ATTITUDE TOWARD WORK</b>				
1. Follows SCOE policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Follows worksite policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Interprets policies and procedures within area of responsibility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Understands and accepts purpose and function of assignment and its relationship to department/SCOE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Accepts criticism and implements suggestions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Accepts responsibility willingly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Endeavors to improve work techniques.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Demonstrates enthusiasm and interest in work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Demonstrates ability to enhance the efficiency and effectiveness in area of responsibility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Accepts new ideas and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

Check the appropriate box. The expectation levels are based on the job description, office policies and practices and the standards for all like positions. Comments must be made if rating of "Does Not Meet Standards", Needs Improvement" or Exceeds Standards" are made.	N/A	Meets Standards	Needs Improvement	Unsatisfactory
<b>RELATIONSHIP WITH PEOPLE</b>				
1. Cooperates with co-workers at all levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Uses appropriate communication skills both oral and written.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Demonstrates team effort when necessary to achieve department/SCOE goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Treats co-workers, clients and the general public in a courteous, helpful and professional manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Responds to others in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<b>PROFESSIONAL GROWTH</b>				
1. Participates in designated in-service training.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	
2. Makes personal effort to improve education and job-related skills.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	
Comments:				

<b>EVALUATION SUMMARY</b>	
A. Evaluator's Comments:	
B. Suggestions for In-Service Training:	
C. Certification of Evaluator: I hereby certify that this report constitutes my best judgment of the service value of this employee and is based on personal observation and knowledge of his/her work.	
Supervisor's Signature:	Date:

D. Waiver (Permanent Employee Only) Evaluation may be waived upon written consent of employee, supervisor and department head. _____ Evaluation for _____ school year waived.	
Employee's Signature:	Department Head's Signature:
Supervisor's Signature	Date:

E. Employee's Comments:	
F. Employee Certification: My signature acknowledges that I have read and/or discussed this evaluation. It does not imply that I agree or disagree. I have received a copy of this evaluation.	
Employee's Signature:	Date:

*This evaluation and all attachments will be places in your personnel file. You have ten (10) days from receipt of this evaluation to make any signed written comments you wish, which will be attached to this evaluation and placed in your personnel file.*