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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. | |
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| **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. | | | |
| Rebuttal: | | | |
| **Employee Signature:** |  | **Date:** |  |
| **Supervisor Signature:** |  | **Date:** |  |