#### iusd2

# CLASSIFIED EMPLOYEE EVALUATION

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| **Name** |       | **Assignment/Position Title** |       |
|  |  | **School/Department** |       |
|  |  | **Hire Date** |       |

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| **Not Applicable** |  | **Outstanding** | **Very Good** | **Average / Acceptable** | **Needs Improvement** | **Deficient** |  |  |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 1. | Dependability in assuming and fulfilling assignments |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 2. | Knowledge of present job |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 3. | Judgment ability |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 4. | Attitude toward job, supervision, employees, and District |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 5. | Effort applied to job |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 6. | Adaptability to new situations/assignments |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 7. | Quantity of acceptable work produced |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 8. | Attendance and/or observance of work hours  |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 9. | Accepts responsibility, plans and organizes. |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 10. | Compliance with District regulations |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 11. | Accepts direction |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 12. | Observance of safety practices |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 13. | Ability to meet deadlines |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 14. | Maintenance of orderly work area |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 15. | Ability to work under stress |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 16. | Care of District equipment |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 17. |  | ) | Employee/Employer established |
| **[ ]**  |  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  | 18. |  | ) | evaluation objectives |

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| **Personal Grooming** |  |
|  | Acceptable | **[ ]**  | Unacceptable | **[ ]**  | Comment: |             |

|  |  |
| --- | --- |
| **Evaluator’s Comments:** |            |

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| **Probationary Employee** |
| 2 month | **[ ]**  |  | : | Re-employment of employee | **[ ]**  |
| 5 month | **[ ]**  | **Evaluator’s recommendation** | : | Needs improvement | **[ ]**  |
|  |  |  | : | Re-employment not recommended | **[ ]**  |

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|   |  |       |

**Evaluator’s Signature Date**

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| **Employee/Employer Established Evaluation Objectives**:  |
| Objective: |       |
| Objective: |       |
| Objective: |       |
| Objective: |       |

Signature by the employee indicates that this evaluation has been read and discussed with the evaluator, but does not necessarily indicate agreement with all factors of the evaluation. ***Employee comments may be added to back of document.***

**Employee’s Signature Date**

***Distribution****: Original to Human Resources for Personnel File; copy to employee; copy to Evaluator 2/2014*