

LEBANON SPECIAL SCHOOL DISTRICT
CLASSIFIED EMPLOYEE EVALUATION REPORT

Name _____ SS# _____
Last First MI

School/Dept/Division/Office/Unit _____ Custodian Food Svc. Other _____

Evaluator (Supervisor) _____ Title _____

Evaluation Period: From _____ To _____ Date(s) of Conference(s) _____

EVALUATION AREA <small>NOTE: Consider listed key words and other pertinent descriptors.</small>	CHECK ONE					COMMENTS <small>ENTER: Improvements, suggestions, goals, potential, etc.</small>
	OUTSTANDING	EXCELLENT	ACCEPTABLE	MARGINAL	DEFICIENT	
APPEARANCE: Consider the employee's overall appearance in connection with the type of work performed. Is the employee's appearance clean, neat, and appropriate for his/her job?						
INITIATIVE: Consider the employee's ability to perform a job with minimum direction. Does the employee make suggestions for improvement in his/her area or undertake new work when the job at hand is complete? Is the employee a self-starter?						
JUDGMENT: Consider the employee's judgment used in making decisions. Does the employee demonstrate the ability to think and act calmly, logically, and rapidly under stress?						
ATTITUDE OF COLLABORATION: Consider how well the employee fits into his/her work environment. Does the employee work in harmony and collaborate with others? Is the employee a team player?						
ATTENDANCE: Consider the employee's arrival and departure from work and time devoted to actual work. Consider promptness in reporting for assignments and the amount of time off for sick leave and personal business.						
KNOWLEDGE OF JOB: Consider the employee's understanding of all phases of his/her job responsibilities that are necessary for complete job performance.						
QUALITY OF WORK: Consider neatness, skill, thoroughness, and accuracy in completing job assignments. Does the employee's performance meet the standards of quality?						
TIME MANAGEMENT: Consider the amount and promptness of work produced based on specific job requirements. Does the employee use time wisely?						
DEPENDABILITY: Consider the employee's reliability in following instructions and carrying out assigned tasks with minimum direct supervision. Will the job be done on time and correctly?						
RESPONSIBILITY: Consider the employee's sense of responsibility and willingness to carry out assigned duties. Does the employee think and act reasonably? Is the employee able to tell right from wrong?						
OTHER:						

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OVERALL EFFECTIVENESS IN JOB PERFORMANCE: Summary Comments

Recommendation:

- Recommended for continued employment.
- *Recommended for continued employment with conditions.
- Not recommended for continued employment.
- Temporary Contract ends.

*A Performance Rating of "Conditional" or "Unsatisfactory" on Annual Performance Report will require a follow-up evaluation within three (3) months. Complete a Professional Development Plan with specific suggestions for growth/improvement.

Specific Comments/Commendations and Recommendations relative to area(s) that are marginal or deficient

A signature on this Classified Employee Performance Report does not necessarily mean that the employee agrees with the opinions expressed, but merely indicates that the employee has received a copy of the report and has been given the opportunity for discussion, comments and written reaction. (Must be provided to the evaluator within three (3) workdays.)

Employee Signature

Date

I have provided an opportunity for comments and written reaction to this Annual Performance Report by the employee.

Signature of Supervisor

Date

Director of Department (Central Office)

Date