



**PERFORMANCE EVALUATION FORM
NON-EXEMPT STAFF**

Employee Name _____

PEID _____
(Datatel number)

Position Title _____

Period covered _____

PERFORMANCE LEVELS

- E Exemplary** Performance consistently far exceeds all expectations.
- D Distinguished** Performance generally exceeds job requirements; well above average.
- C Competent** Meets all job responsibilities in this area.
- N Needs Improvement** Performance needs improvement with guidance.
- U Unacceptable** Performance is well below minimum standards.
- N/A Not applicable** Does not apply to this position/person.

PERFORMANCE FACTORS

From the performance levels above assign a letter that best explain each performance factor. Add any comments if necessary.

Knowledge of the job: Possesses the knowledge and technical competencies required to perform job responsibilities; understands relevant policies, procedures, and organizational structure and function.

Quality of work: Produces work to meet acceptable standards including accuracy, neatness, and completeness.

Quantity of work: Produces amounts of work consistent with established standards.

Dependability/Responsibility: Willingly takes on, is held accountable for, and performs assignments in a timely manner.

Decision-making, problem solving, and judgment: Identifies problems and opportunities, gathers and organizes facts, and makes effective decisions using sound judgment.

Technical/job related skills: Possesses and applies the technical/job related skills to perform the job.

Communications skills: Conveys information clearly and logically both orally and in writing.

Interpersonal relations: Develops and maintains positive working relationships with others.

Initiative and resourcefulness: Offers suggestions; anticipates needs; seeks additional tasks as time permits; and contributes, develops, and/or carries out new ideas or methods.

Attendance and punctuality: Reports to work on time, observes time limits for lunches, gives prompt notice of absence due to illness, and adheres to all applicable college policies.

OVERALL EVALUATION

Using the criteria in this performance review as a guideline, assign one of the following performance levels for the employee's overall performance.

Exemplary

Distinguished

Competent

Needs Improvement

Unacceptable

Comments:

SIGNATURES

I certify by my signature below that the contents of this performance review have been discussed with the employee.

Supervisor: _____ Date : _____

I certify by my signature below that this performance review has been discussed with me. I have read and understand the contents. I understand that my signature does not necessarily indicate agreement with statements made herein.

Employee: _____ Date : _____

Please return completed evaluation to the Temple College Human Resources Office.