

OREGON CITY SCHOOLS CLASSIFIED EMPLOYEE PERFORMANCE EVALUATION

Name Department Date

Position Title Location Supervisor

PERFORMANCE FACTORS		Check Proper Column				
		Outstanding	Very Good	Good	Needs Improvement	Unsatisfactory
1. QUALITY OF WORK	Accuracy, completeness, thoroughness, neatness of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. QUANTITY OF WORK	Amount of work done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. KNOWLEDGE	Knowledge of methods, materials, objectives, and other fundamental information skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. LEARNING ABILITY	Speed and thoroughness in learning procedures, rules and other details, alertness, perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. WORK HABITS	Organization of work, care of equipment, safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. RELATIONSHIP WITH PEOPLE	Ability to get along with the public and other employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. DEPENDABILITY	Degree to which he/she can be relied upon to do the job without close supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. ATTENDANCE	Frequency and nature of absences and tardiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. ATTITUDE	Interact in the workplace, willingness to meet job requirements and accept suggestions, loyalty to organization, ethical conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. PERSONAL FITNESS	Physical capacity, appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. JUDGEMENTS	Soundness of decisions, common sense	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. OVERALL RATING	Should reflect the above rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EMPLOYER COMMENTS

EMPLOYEE COMMENTS

I acknowledge that the above evaluation has been discussed with me and that I understand my signature does not imply agreement or disagreement.

Employer's Signature

Date

Employee's Signature

Date