## SAN JOSE • EVERGREEN COMMUNITY COLLEGE DISTRICT CLASSIFIED EMPLOYEE PERFORMANCE EVALUATION

Employee Name	e	Job Title
Evaluation Perio	od	to
Department		Supervisor
Check one:	Permanent - Annual 🗆 Special 🗆	Probationary: 2 mo. 🗆 5 mo. 🗆

All Ratings must include comments. Comments and goals may be included in an attachment if additional space is needed. If Rating is Unsatisfactory or Needs Improvement, a strategy to address performance deficit is required, which may include a Performance Improvement Plan where appropriate. If Performance Area does Not Apply to this position, check the N/A box

PERFORMANCE AREAS	EXCEEDS EXPECTATIONS	MEETS EXPECTATIONS	NEEDS IMPROVEMENT	UNSATISFACTORY
KNOWLEDGE:				
Demonstrates knowledge of job-related skills and position requirements.				
□ N/A				
COMMENTS:			·	
				-
QUANTITY/AMOUNT OF WORK:				
Completes assigned work in a timely manner.				
□ N/A				
COMMENTS:				

QUALITY: Work is accurate, neat and thorough; pays attention to detail for assigned tasks; demonstrates positive work habits.		
□n/A		
COMMENTS:	 	 
JUDGMENT: Performs well with minimal instruction; makes sound decisions absent detailed instructions or direct supervision.		
□n/A		
COMMENTS:	 <u> </u>	 

ADAPTABILITY/INITIATIVE:				
Resourceful in meeting job responsibilities in new situations.				
Responds to challenges with a positive, problem-solving approach; accepts appropriate assignments and recommendations for improvement.				
□n/a				
COMMENTS:	1	1	1	
RELIABILITY:				
Responds to assignments and requests for information or assistance in a timely manner.				
□n/A				
COMMENTS:				
ATTENDANCE:				
Prompt attendance on a				
consistent basis. Takes appropriate breaks. Informs				
supervisor in timely manner of				
lateness or absence.				
□n/a				
COMMENTS:				

PROFESSIONAL INTERACTIONS & COOPERATION:				
Communicates with and				
presents to coworkers,				
supervisors, students and				
community members in a				
professional, respectful manner; willingness to help				
others; works well in diverse				
environment.				
COMMENTS:				
TIME MANAGEMENT:				
Plans time efficiently and				
effectively; resourceful; ability				
to prioritize work.				
□ N/A				
COMMENTS:				
	-	-		
COMMUNICATION:				
Communicates effectively,				
both verbally and in writing.				
□n/A				
COMMENTS:				
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<u>SAFETY:</u>				
Works safely and uses good				
judgment in work				
environment.				
□ N/A				
COMMENTS:				

Diversity Equity Inclusion &			
Accessibility (DEIA):			
Promotes and incorporates			
culturally affirming Diversity			
Equity Inclusion and Accessibility (DEIA) and Anti-			
Racism/Anti-Bias principles to			
nurture and create a			
respectful, inclusive, and			
equitable learning and work environment.	 	_	
COMMENTS:			
Diversity Equity Inclusion &			
Accessibility (DEIA):			
Respects and acknowledges			
the diversity of student and			
colleagues in conducting			
duties.			
COMMENTS:			
LEAD RESPONSIBILITIES:			
[ONLY APPLICABLE FOR			
POSITIONS WITH LEAD			
WORKER DUTIES]			
Plans, assigns, and reviews			
work as appropriate to job			
classification; applies rules and			
procedures accurately and			
consistently; collaborates with			
supervisors to ensure appropriate delegation;			
communicates workplace			
strategies and challenges with			
supervisor.			
supervisor.			
□ N/A			

## **GOALS FOR CURRENT EVALUATION CYCLE**

Goal:

Measurement and Additional Resources to Accomplish (if applicable):

Status toward Goal:

Goal:

Measurement and Additional Resources to Accomplish (if applicable):

Status toward Goal:

<u>Goal:</u>

Measurement and Additional Resources to Accomplish (if applicable):

Status toward Goal:

## **GOALS FOR NEW EVALUATION CYCLE**

Goal:

Measurement and Additional Resources to Accomplish (if applicable):

Goal:

Measurement and Additional Resources to Accomplish (if applicable):

Goal:

Measurement and Additional Resources to Accomplish (if applicable):

Evaluator's additional comments, if any (Attach a separate sheet, if necessary)

Evaluator's Signature and Title

Date

Employee Statement: I acknowledge that I have reviewed this evaluation and any attached addendum and have discussed them with my supervisor. I understand that my signature does not necessarily mean that I agree with this evaluation, but that I acknowledge receipt of a copy.

Employee's Comments (Attach a separate sheet, if necessary).

Employee's Signature

Date