

DATE: _____

APPENDIX E

PERFORMANCE EVALUATION FOR AFSCME EMPLOYEE

EVALUATION STATUS

EMPLID: _____

_____ 3 Month Probationary	NAME _____
_____ 5 Month Probationary	TITLE _____
_____ Probation Extension End	DEPARTMENT _____
_____ Annual/Year _____	ANNIVERSARY DATE IN UMMS SERVICE _____
_____ Other/Year _____	ANNIVERSARY DATE IN TITLE _____

DEFINITION FOR RATING TO BE APPLIED

- | | |
|----------------------------|------------------------------------------------------|
| 1. MEETS STANDARDS | Accomplished goals; meets departmental standards |
| 2. NEEDS IMPROVEMENT | Below average performance but potentially acceptable |
| 3. DOES NOT MEET STANDARDS | Many goals unrealized or many tasks not performed |
| 4. NOT APPLICABLE (N/A) | Not applicable to the job |

**SPECIFIC EXAMPLES
MAY BE CITED IN
THE SPACE
PROVIDED FOR
COMMENTS AND
MUST BE CITED
WHEN CATEGORIES**

QUALITY AND QUANTITY OF WORK	1. MEETS STANDARDS	2. NEEDS IMPROVEMENT	3. DOES NOT MEET STANDARDS	4. N/A
A. Demonstrates knowledge of the job				
B. Amount of work accomplished				
C. Performs work with accuracy				
D. Work is neat and presentable				
E. Work is thorough				
F. Organizes work appropriately				
SUPERVISOR'S COMMENTS:				
EMPLOYEE'S COMMENTS:				

WORK HABITS:	1. MEETS STANDARDS	2. NEEDS IMPROVEMENT	3. DOES NOT MEET STANDARDS	4. N/A
A. Is regular in attendance at work				
B. Observes established working hours				
C. Completes work on time				
D. Demonstrates the ability to work without supervision				
E. Complies with departmental and institution policies				
F. Complies with instructions, rules and regulations, including health and safety precautions				
SUPERVISOR'S COMMENTS:				
EMPLOYEE'S COMMENTS:				
WORK ATTITUDES	1. MEETS STANDARDS	2. NEEDS IMPROVEMENT	3. DOES NOT MEET STANDARDS	4. N/A
A. Endeavors to improve work techniques				
B. Accepts new ideas, procedures				
C. Accepts constructive criticism and suggestions				
D. Accepts responsibility				
E. Adapts to emergency situations				
SUPERVISOR'S COMMENTS:				
EMPLOYEE'S COMMENTS:				

RELATIONSHIPS WITH OTHERS:	1. MEETS STANDARDS	2. NEEDS IMPROVEMENT	3. DOES NOT MEET STANDARDS	4. N/A
A. Works well with co-workers				
B. Works well with the public				
C. Cooperates with supervisors and other staff members				
D. Observes established channels of Communication				
SUPERVISOR'S COMMENTS:				
EMPLOYEE'S COMMENTS:				
SUPERVISORY ABILITY (where applicable)	1. MEETS STANDARDS	2. NEEDS IMPROVEMENT	3. DOES NOT MEET STANDARDS	4. N/A
A. Demonstrates leadership ability				
B. Makes timely decisions				
C. Is fair and impartial in relationship with subordinates				
D. Trains and instructs subordinates				
E. Maintains acceptable performance standards among employees				
SUPERVISOR'S COMMENTS:				
EMPLOYEE'S COMMENTS:				

COMMENTS OF SUPERVISOR WHO PERFORMED THIS EVALUATION:

Recommendations:

_____ Retention (probationary)
_____ Dismissal (probationary)
_____ Extend Probation
_____ No action required
_____ Other _____

Signature and Title_____
Date

Comments of Employee:_____
Date of Discussion with Supervisor

Signature of Employee Being Evaluated
(Does not imply agreement or disagreement with
Evaluation)

COMMENTS OF DEPARTMENT HEAD REVIEWING EVALUATION:

_____ Meets Standards

_____ Does Not Meet Standards

Recommendations:

_____ Retention (Probationary)
_____ Dismissal (Probationary)
_____ Extend Probation
_____ No Action Required
_____ Other _____

Signature and Title_____
Date

Comments of Employee:

I have read the comments of my supervisor and department head

Signature of Employee_____
Date