

Potlatch School District #285
Classified Employee Evaluation Form

Employee's Name: _____ Position: _____

School/Department: _____ Evaluator: _____

Date: _____ Contract Year: _____

1 - Satisfactory 2 – Unsatisfactory 3 – Not Evaluated

**Any Unsatisfactory ratings must be accompanied by an explanation*

WORK HABITS	1	2	3
Observance of working hours			
Attendance			
Observance of rules and regulation			
Compliance with work instructions			
Work attitude			
Care of property			
Comments			

PROFESSIONALISM	1	2	3
Cooperation with fellow employees			
Cooperation with other departments			
Cooperation with public			
Personal appearance			
Loyalty to district programs/policies			
Personal conduct			
Telephone manners			
Works and relates well with others			
Maintains Confidentiality			
Comments			

JUDGMENT	1	2	3
Ability to make decisions			
Accuracy of judgment			
Comments			

Potlatch School District Classified Personnel Handbook

QUANTITY OF WORK	1	2	3
Amount of work performed			
Completion of work on schedule			
Fulfills major duties and responsibilities as in job description			
Comments			

QUALITY OF WORK	1	2	3
Accuracy			
Neatness			
Thoroughness			
Organizing and planning			
Comments			

SUPERVISORY ABILITY	1	2	3
Delegation of authority			
Training and instruction			
Disciplinary control			
Evaluating performance			
Leadership			
Fairness and impartiality			
Approachability			
Making personnel decisions			
Comments			

ADDITIONAL COMMENTS:

OVERALL WORK PERFORMANCE RATING OF: Satisfactory _____ Unsatisfactory _____

This evaluation has been discussed with me. Signature does not necessarily indicate agreement with the content of this evaluation. Rebuttals by the employee may be attached to this form and placed in their personnel file. Supervisors are to contact building principals when necessary to review this evaluation.

Employee Signature/Date

Supervisor Signature/Date
