

Craig City School District Classified Employee Evaluation

Employee Name:
Employee Position:
Location/Department:
Evaluator Name:
Evaluation Date:
Grade/Subject:

Analysis:

Effective Practices:

The following effective practices have been observed:

Areas for Growth:

The following areas for growth have been observed:

SIGNATURES

Evaluator's Signature

Date

Employee's Signature

Date

The signature of employee acknowledges receipt of document, not agreement with its comments. The employee has a time period of 48 hours after the final draft of the evaluation is received to sign and return to the evaluator. Evaluations of classified employees are to be kept in the employee's personnel file at the District Office.