

**CLASSIFIED  
PERSONEL  
EVALUATION**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Location: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Period Covered: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

<p><b>Evaluator:</b> Place a check mark in the column which best describes the performance of the person being evaluated. Items should be based on personal observation and input received by other supervisors of the employee.</p>		Unsatisfactory	Area of Concern	Satisfactory	Outstanding
<p><b>1. Skill Level</b></p>	<p>The employee has thorough knowledge of his/her job, understands and executes all duties assigned.</p>				
<p><b>2. Supervision</b></p>	<p>The employee requires minimum supervision in performing his/her assigned duties.</p>				
<p><b>3. Attitude</b></p>	<p>The employee shows interest and enthusiasm in his/her work. He/she is conscientious and thorough, is cooperative, works well with others (including supervisors, students, teachers, and parents), and willingly assumed his/her full share of work and responsibility.</p>				
<p><b>4. Judgment</b></p>	<p>The employee has the ability to think and act calmly, logically, and rapidly under stress, demonstrates the ability to keep confidences when they concern children, parents, and other employees. The employee demonstrates discretion and integrity in any discussion concerning the District, his/her supervisor(s), and his/her co-workers.</p>				
<p><b>5. Initiative</b></p>	<p>The employee is motivated to work, assumes responsibility in the absence of instruction, and can start and carry through with needed work. The employee uses his/her aptitude and ability to learn new work quickly.</p>				
<p><b>6. Attendance</b></p>	<p>The employee is punctual in reporting to work and returning from rest periods, and his/her attendance reflects a minimum of absences.</p>				
<p><b>7. Quality of Work</b></p>	<p>The employee is accurate, efficient, and neat in his/her work.</p>				
<p><b>8. Quantity of Work</b></p>	<p>The employee promptly performs the quantity of work expected of him or her and demonstrates the ability to work steadily.</p>				
<p><b>9. Appearance/Attire</b></p>	<p>The employee's appearance and attire are appropriate for the assigned job.</p>				
<p><b>10. Safety Practices</b></p>	<p>The employee works in a safe manner.</p>				
<p><b>11. Leadership</b></p>	<p>The employee has a broad knowledge of his/her job, and demonstrates the ability and willingness to lead others in his/her area of responsibility.</p>				

Evaluatee's Name: \_\_\_\_\_

**Classified Personnel Evaluation**

**Evaluator's Comments:**

You must comment on all areas including Outstanding. If an Unsatisfactory or an Area of Concern is checked, make specific comments on why the employee is unsatisfactory or explain the area(s) of concern and what you have done or will do to assist the employee to improve:

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Evaluator**

**Recommendation:** Continuance in Classification \_\_\_\_; Continue Probation for \_\_\_\_ months

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**Employee's Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Employee**  
(Employee's signature indicates only that he/she has read this evaluation, and implies neither agreement nor disagreement with remarks/ratings herein contained.)

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**Reviewer's Recommendation:**

\_\_\_\_ I concur with this evaluation; \_\_\_\_ Further action is indicated.

**Reviewer's Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Reviewer**

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**Human Resources Office Endorsement:**

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Assistant Superintendent of HR**

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**Recommendation:** Continuance in Classification \_\_\_\_; Permanent Status Granted \_\_\_\_;  
Continue Probation \_\_\_\_; Reassignment \_\_\_\_; Dismissal \_\_\_\_.

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**Distribution:**

*White Copy:* Human Resources

*Yellow Copy:* Supervisor

*Pink Copy:* Employee