

NON-INSTRUCTIONAL PERSONNEL EVALUATION FORM

BAKER COUNTY SCHOOL DISTRICT

Name: _____ School/Department: _____

Job Title: _____ Date: _____ Evaluation Period: 2026 - 2027

PLEASE CIRCLE ONE FOR EACH CRITERIA:

PERFORMANCE EVALUATION CRITERIA	EXCEPTIONAL	SATISFACTORY	NEEDS IMPROVEMENT	UNSATISFACTORY
Job Knowledge	10	8	7	5
Work Productivity	10	8	7	5
Quality of Work	10	8	7	5
Communication Skills	10	8	7	5
Attendance and Punctuality	10	8	7	5
Professionalism	10	8	7	5
Teamwork	10	8	7	5
Safety and Compliance	10	8	7	5
Adaptability	10	8	7	5
Point total for each column				
Total points earned				

PERFORMANCE RATING SCALE:

- ☐ Exceptional (81-90 points / 90-100%) ☐ Satisfactory (72-80 points / 80-89%)
☐ Needs Improvement (63-71 points / 70-79%) ☐ Unsatisfactory (Below 63 points / Below 70%)

RECOMMENDATION: This employee is recommended for:

- ☐ Reappointment ☐ Non-Reappointment ☐ Recommended for Continuous Employment ☐ Already on Continuous Employment

Comments and/or Supporting Statements: _____

I have reviewed this assessment with my supervisor. (Attach any comments)

Signature of Employee: _____ Date: _____

Signature of Principal/Evaluator: _____ Date: _____

NOTE: Documentation for each "unsatisfactory" rating must be attached. The employee must have acknowledged in writing receipt of a copy of the documentation along with any attending statements. Written supporting statements are required for a rating in the "needs improvement" column.

Distribution: Original District; Copy School; Copy Employee