Κ Santa Barbara Community College **District Classified Employee Evaluation** \_\_\_\_\_ Classification \_\_\_\_\_Last Evaluation Date\_\_\_\_\_ Employment Date Evaluation Period Permanent Employee (Annual) Special Evaluation 3rd month Promotional 5th month Promotional

Probationary Employee 1st Month 3rd Month 5th Month (Determine Permanency)

Review the dimensions of performance: under each category, comment on the employee's accomplishments and challenges during the evaluation period. Indicate the level of performance achieved using the following scale:

5=Outstanding (Consistently exceeds expectations)

Employee Name

Department/Division

4=Exceeds Expectations (Often exceeds expectations)

3=Meets Expectations (Performs according to job description)

2=Needs Improvement (Improvement necessary to meet performance standards)

1=Unsatisfactory (Fails to meet acceptable performance standards)

## PLEASE NOTE: Individual category ratings must be in whole numbers

Quality of Work: Demonstrates satisfactory knowledge of the job. Performs work with acceptable accuracy and is thorough in 1) the work done. Displays commitment to excellence; looks for ways to improve and promote quality. Work is neat and presentable. Demonstrates ability to use current technology in performing job duties.

Rating: Comments:	5	4	3	☐ 2	□ 1	
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Quantity of Work: Volume of work regularly produced within established schedules and deadlines that meet job requirements 2) and guidelines. Demonstrates efficiency in use of time and resources including effective modes of communication i.e. email, telephone.

Rating: Comments:	5	4	□ 3	2	□ 1	

Work Habits: Reports to work on time: complies with reporting standards for attendance; takes appropriate breaks and meal 3) periods. Carries out tasks in an orderly and diligent manner. Carries out the responsibilities of the position with minimal supervision and guidance. Completes mandatory trainings as required. Complies with instruction, SBCC policies and procedures, including health and safety precautions. Adheres to Article 9.3 (Vacation) of CSEA contract and has not exceeded their 24-month maximum vacation accrual.

Rating: Comments:	5	□ 4	3	□ 2	□ 1

4) Work Attitudes: Endeavors to improve work techniques. Accepts new ideas and procedures. Is solution-oriented. Is cooperative and willing to accept supervisor's suggestions for improvement. Accepts responsibility willingly within the job description guidelines. Balances individual and department responsibilities; works effectively as part of a group.

Rating: Comments:	5	4	3	2	1	

5) **Relationships with others:** Acts in a manner that reflects respect, collaboration, courtesy, civility, and appreciation. Gets along well with fellow staff, student and the public. Cooperates with supervisor and others. Observes established channels of communication. Consider the degree to which the staff member demonstrates professionalism in interactions and attempts to understand and respond to the needs of others who are internal or external to the department and/or College.

Rating: Comments:	5	4	3	2	□ 1	
	<b>e-based Qualities</b> s and new situations or.					
Rating: Comments:	5	□ 4	3	□ 2	□ 1	
decisions. T	hers: Demonstrates rains and instructs rd common goals, ir	co-workers effecti	ively. Plans, scheo	dules and makes a	assignments fair a	nd impartially. N
decisions. T others towar Rating: Comments: B) Profession participate in	rains and instructs d common goals, ir	co-workers effection tegrates changes <b>4</b> articipates in the F lopment and caree	vely. Plans, sched , demonstrates abi <b>3</b> Professional Growt or goals. Applies pi	dules and makes a lity to coach, ment <b>2</b> h Program. Takes rofessional develo	assignments fair a or, train and devel	nd impartially. Nopothers.

\_\_\_\_I have performed work outside my current Board approved job description in the past calendar year.

\_\_\_\_I have not performed work outside my current Board approved job description in the past calendar year.

\_\_\_\_\_I have been asked by my supervisor to perform new duties in the past calendar year. I am unclear as to whether or not these duties are included in my current Board approved job description. I am requesting a meeting with my supervisor, Human Resources, and my labor representative in order to receive clarification.

## **Performance Goals**

Section 1) List goals accomplished during this evaluation cycle.

## **Overall Work Performance**

Please calculate the overall performance rating by averaging the scores above. The formula is as follows: add the points for each applicable category and divide the total number of points by the number of applicable categories. Overall performance rating (round to the nearest tenth)\_\_\_\_\_

Please check the employee's overall rating:

 $\Box$  5 = Outstanding  $\Box$  4 = Exceeds Expectations  $\Box$  3 = Meets Expectations  $\Box$  2 = Needs Improvement  $\Box$  1 = Unsatisfactory

## For probationary employee only, recommend:

- □ Grant Permanent Status
- Continue Probationary Period (1st and 3rd month evaluation only)
- Discontinue Employment of Probationary Employee

**Evaluator's Comments:** (Category ratings of "Needs Improvement" or "Unsatisfactory" must be supported by a statement of the facts. Specific suggestions for improvement must be included. Comments may also include special commendations.)

**Employee Signature:** My signature below signifies that I have read and discussed this evaluation with my supervisor. It does not imply that I agree with the evaluation. A copy of this evaluation will be placed in my personnel file and provided to me. I understand that I have the right to submit a written response to this evaluation which shall be attached to this evaluation and placed in my personnel file.

Employee's Signature	Date	Supervisor's Signature	Date
Employee's Printed Name		Supervisor's Printed Name	
		·	
		Area Manager Signature	Date
		Area Manager Printed Name	