

Mountain View Whisman School District Classified Personnel Performance Evaluation

Name _____ Job Title _____ Site/Dept. _____

4 Month Probationary Evaluation

8 Month Probationary Evaluation

Do you recommend continuing employment Yes No

Do you recommend permanency? Yes No

Permanent Employee Evaluation

Special Evaluation

Please check here if three of more items are rated "Support Needed" or "Unsatisfactory". A "Special Evaluation" must be completed within two months.

Directions: When "Support Needed" and/or "Unsatisfactory" is checked, the evaluator must write an Assistance Plan.

	Outstanding	Satisfactory	Support Needed	Unsatisfactory	Not Observed	Reason for "Support Needed" or "Unsatisfactory" comments Please attach Assistance Plan
1. Skills to Perform Job Duties						
2. Quality of Work						
3. Professional Judgement						
4. Initiative and Resourcefulness						
5. Attendance and Punctuality						
6. Interpersonal Skills						
7. Dependability						
8. Takes Responsibility						
9. Collaboration						
10. Accepts and Acts on Feedback						
11. Planning/Organizing						
12. Adherence to Known District Practices and Procedures						
13. Operation and Care of Work Area, Equipment and Supplies						

Evaluator Comments: Recognition of strengths/outstanding performance and/or recommendations for improvement

Date _____ Evaluator _____ (signed)

Employee Comments: (The employee is invited to make written comments below.)

Date _____ *Employee _____ (signed)

*This signature indicates that the employee has seen and discussed the evaluation report. It does not necessarily indicate complete agreement with all factors of the evaluation. The employee is encouraged to attach any additional documentation to support position.