

COUNTY OF GLENN  
EMPLOYEE PERFORMANCE EVALUATION REPORT

Regular \_\_\_\_\_  
Probationary \_\_\_\_\_

Employee \_\_\_\_\_ Department \_\_\_\_\_

Classification \_\_\_\_\_ Report Period From \_\_\_\_\_ to \_\_\_\_\_

Check the box after each factor which you feel best describes the employee	Unsatisfactory	Improvement Needed	Satisfactory	Good	Excellent
<b>PERSONAL RELATIONS</b>					
1. Meeting and handling the public					
2. Getting along with fellow employees					
3. Personal appearance					
<b>WORK HABITS</b>					
1. Observance of working hours					
2. Attendance					
3. Observance of rules and regulations					
4. Observance of safety rules					
5. Compliance with work instructions					
6. Orderliness in work					
7. Application to duties					
<b>QUANTITY</b>					
1. Amount of work performed					
2. Completion of work on schedule					
<b>QUALITY</b>					
1. Accuracy					
2. Neatness of work product					
3. Thoroughness					
4. Oral expression					
5. Written expression					
<b>ADAPTABILITY</b>					
1. Performance in new situations					
2. Performance in emergencies					
3. Performance with minimum instructions					
<b>INITIATIVE</b>					
1. Self-reliance					
2. Resourcefulness					
3. Willingness to accept and carry out responsibility					
<b>SUPERVISORY ABILITY (Only for Supervisors)</b>					
1. Planning and assigning					
2. Training and instructing					
3. Disciplinary control					
4. Evaluating performance					
5. Leadership					
6. Making decisions					
7. Fairness and impartiality					
8. Approachability					

Use space below for comments and suggestions about how to improve performance. OVER-ALL RATINGS OF EXCELLENT OR UNSATISFACTORY MUST BE SUBSTANTIATED IN WRITING.

OVER-ALL RATING				
(This rating should be consistent with ratings above)				
Unsatisfactory	Improvement Needed	Satisfactory	Good	Excellent

This report represents my best judgment of this employee's performance

Rater \_\_\_\_\_

Date \_\_\_\_\_

I concur in and approve this report and (do)(do not) recommend a merit increase

Dept. Head \_\_\_\_\_

Date \_\_\_\_\_

This report has been discussed with me by my Rater or Department Head, but in signing I do not necessarily agree with conclusion of rater.

Employee \_\_\_\_\_

Date \_\_\_\_\_

## **COUNTY OF GLENN**

There is always some place where we can improve our work. The purpose of this evaluation is to let you know how well you are doing your job, and to suggest ways in which you can do even better. Its principal value lies in its discussion between the supervisor and the worker and in their plans to make full use of the employee's strengths and to overcome his or her weaknesses. You will be rated on each "Performance Factor" which enters into your job. In addition, your supervisor will make specific comments to discuss unusual ratings in detail or to cover factors not listed on the form.

### **DEFINITION OF RATINGS**

<i>Excellent</i>	Outstanding performance. This rating may be given only to the employee whose performance is considerably better than expected of a fully competent employee. It is given for accomplishment rather than effort. This rating is to be used sparingly and only where it can be logically and factually substantiated.
<i>Good</i>	Total work performance is above the standards of performance required for the position and is consistently well above the standard expected of the thoroughly competent worker in that job.
<i>Satisfactory</i>	Typically satisfactory performance is the standard expected of an efficient, fully competent employee in the same class after an appropriate period of training. As an overall rating this evaluation may be assigned even though the employee needs to improve in some aspects of his or her performance.
<i>Improvement Needed</i>	Improvement needed for the work performance to be fully satisfactory, added effort with additional training or experience probably will bring the performance up to standard.
<i>Unsatisfactory</i>	Work performance is inadequate and definitely inferior to the standard of performance required for the position.
<i>Over-All Rating</i>	The over-all rating should be consistent with the factor ratings, but there is no prescribed formula for computing it. Individual factors may be of greater or of less importance to different jobs.

### **WHEN THIS REPORT IS MADE**

<i>Permanent Employee</i>	Annually, at least fourteen (14) days prior to the employee's anniversary date.
<i>Probationary Employee</i>	Prior to the end of the third (3rd) and (6th) months of service.
<i>Distribution:</i>	Three copies will be completed and distributed to: <ol style="list-style-type: none"><li>1. Employee</li><li>2. Department Head</li><li>3. Personnel Department (Original)</li></ol>