**Executive Director Performance Evaluation**

Name of Employee: Evaluation Date:

Employee Job Title:

Evaluation Type: ❑ 6 month ❑ Yearly ❑ Disciplinary ❑ Exit

Evaluator: Title:

**Needs Improvement:** needs to improve performance.

**Acceptable:** displays professional level of performance at minimum level.

**Excellent:** meets or exceeds professional level of performance.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Executive Director | | | | | | Employees | | | | | | Personnel Committee | | | | | |
|  | Needs Improvement | | Acceptable | | Excellent | | Needs Improvement | | Acceptable | | Excellent | | Needs Improvement | | Acceptable | | Excellent | |
| Provides positive leadership |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Provides good managerial examples to his/her staff |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Provides guidance and encourages staff to perform efficiently |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Assists staff in career development and training opportunities |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Provides a positive role model for staff in all areas of evaluation |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Encourages professional development of staff |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Encourages and adheres to open door policy for staff thereby facilitating discussions |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Ability to model team leadership as well as team membership capabilities |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Keeps staff informed as to any new and updated information regarding the program |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Ability to maintain accurate staff records and adhere to time lines for administrative duties |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Ability to articulate information to staff in a precise and accurate manner |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Ability to model flexibility in all aspects of supervision of staff |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | | Executive Director | | | | | | Employees | | | | | | Personnel Committee | | | | | |
|  | | | Needs Improvement | | Acceptable | | Excellent | | Needs Improvement | | Acceptable | | Excellent | | Needs Improvement | | Acceptable | | Excellent | |
| Do you feel you have been adequately trained to perform your duties? | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Represents the Center in a professional manner | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Available for consultation to staff for after hour emergencies | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| Addresses problems or conflicts in the workplace in a timely manner | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |

**Additional Comments:**

Briefly discuss specific strengths of this Executive Director (if additional space is needed, please attach page):

Briefly discuss areas, which this Executive Director needs to strengthen or develop (if additional space is needed, please attach page):

**Board of Director’s Only** – Rate Executive Director on networking with others –

**Evaluated Supervisor’s Response:**

Please comment on the overall content of the evaluation and your strengths as you see them (if additional space is needed, please attach page):

I concur with this evaluation I do not concur, for the following reasons:

Evaluated Executive Director Date

Evaluator Date