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| **EXECUTIVE EMPLOYEE EVALUATION FORM** |
|  |  |  |  |  |
| **Employee's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  | **Evaluation Period Ending\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Behaviors and Working Relationships**  |
| **[4. Exceptional] [3.Satisfactory] [2. Needs Improvement] [1.Unsatisfactory]** |
| **I. General Criteria** | **E** | **S** | **NI** | **U** | **Comments** |
| 1. **Professionalism**
 | **4** | **3** | **2** | **1** |  |
| Appears Professional and Well-groomed |   |   |   |   |  |
| Exhibits Punctuality and Attendance |   |   |   |   |  |
| Maintains Confidentiality |   |   |   |   |  |
| Practices Safety Habits |   |   |   |   |  |
| Utilizes Professional Development |   |   |   |   |  |
| Is Knowledgeable of and Adheres to Agency Policies and Procedures |   |   |   |   |  |
| 1. **Communication and Relations**
 |  |  |  |  |  |
| Displays Superior Client Relations |   |   |   |   |  |
| Keeps Supervisor Informed  |   |   |   |   |  |
| Follows Supervisor's Directions |   |   |   |   |  |
| Displays Effective Written and Oral Communication |   |   |   |   |  |
| Demonstrates cultural awareness in service delivery and agency communication |  |  |  |  |  |
| 1. **Teamwork**
 |  |  |  |  |  |
| Practices Teamwork |   |   |   |   |  |
| Works to achieve organizational goals |  |  |  |  |  |
| 1. **Quality/Quantity of Work**
 |  |  |  |  |  |
| Demonstrates Productivity |   |   |   |   |  |
| Exhibits Initiative |  |  |  |  |  |
| Demonstrates Resourcefulness |  |  |  |  |  |
| Manages Program Resources |  |  |  |  |  |
|  |  |  |  |  |
| **Job Specific Duties**  |
| **A. Primary duties based on job description** |
| **Performance level indicators4 Consistently generates results above those expected of the position.****3 Fulfills all major position requirements and generates desired results.****2 Progressing, but not yet fulfilling all position requirements.****1 Overall work performance is unsatisfactory and does not meet** **minimum job standards.** |
| **[4. Exceptional] [3.Satisfactory] [2. Needs Improvement] [1.Unsatisfactory]** |
| **Performance Level:**4 | **Exceptional** |
| Specific Job Function(s): |
| Comments:  |
| **Performance Level:**3 | **Satisfactory** |
| Specific Job Function(s):  |
| Comments:  |
| **Performance Level:**2 | **Needs Improvement** |
| Specific Job Function(s):  |
| Comments:  |
| **Performance Level:**1 | **Unsatisfactory** |
| Specific Job Function:  |
| Comments:    |
| **III. Continuous Improvement Goals** |
| 1 |
| 2  |
| 3  |
| **IV. Comments:**  |  |
|        |  | **3****☐** | **2****☐** | **1****☐** |
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| ***Notice to Employee:*** It is the right of the individual being evaluated to file a written statement regarding this evaluation. This written statement must be presented to the supervisor within 14 working days of receiving this evaluation. It is suggested that you keep a copy of your statement responding to your evaluation and obtain an acknowledgement of receipt from the supervisor. * Employee comments attached

 Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ACKNOWLEDGEMENT OF RECEIPT*My signature below signifies that I have read and been provided with a copy of this evaluation, and that I understand my right to respond in writing, should I desire to do so. My signature is not an indication of my agreement or disagreement with the evaluation.* Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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