NAME OF EMPLOYEE: 
POSITION: 
DATE: 
RETURN BY: 
FACULTY/DEPARTMENT: 

CHECK ONE: 8 week rating ( ) 16 week rating ( ) 22 week rating ( ) Other ( )

RATING PROFILE:
1. EXCELLENT—consistently performs above the position requirements
2. VERY GOOD—normally performs beyond the position requirements
3. SATISFACTORY—meets requirements of the position
4. BELOW AVERAGE—below necessary requirements and must improve
5. UNSATISFACTORY—rejection or discipline should be considered unless there is an immediate improvement. (Enter rating in boxes below)

NOTE: IF RATING ON THE FINAL RATING FORM IS MARKED “BELOW AVERAGE” AND/OR “UNSATISFACTORY,” THE EMPLOYEE WILL BE DISMISSED OR PROBATION MAY BE EXTENDED UNDER ARTICLE 9.1.2.

1. KNOWLEDGE OF WORK
Consider how well the employee knows the necessary principles and procedures of the job. (e.g. well informed on all phases of the position; thorough knowledge of all phases of the position as well as related functions; little knowledge of the position).

COMMENT:

2. QUALITY OF WORK
Consider the correctness and degree of excellence of work duties performed under normal conditions. (e.g. exceptionally high quality of work; meets quality standards regularly; faulty, indifferent work).

COMMENT:

3. QUANTITY OF WORK
Consider the volume of work produced under normal conditions. (e.g. consistently below minimum standards; usually behind schedule; works quickly, turns out more than normal workload; works at a moderate speed, turns out good quantity of work).

COMMENT:

4. INITIATIVE
Consider ability demonstrated to commence work and assignments without having to be prompted. (e.g. need constant direction; avoids making decisions; innovative; controls the work flow; consistently able to be a self-starter; willing to go beyond minimum requirements).

COMMENT:

5. WORKING RELATIONSHIPS
Consider manner of handling relationships. Attitude towards other employees, supervisors, students and the public. (e.g. uncooperative; resents constructive criticism; cooperative; good influence on others; regularly offers assistance; approachable; usually helpful and cooperative; willing to help when requested).

COMMENT:
6. **DEPENDABILITY**
Consider reliability to handle assignments. (e.g. occasionally unreliable and occasionally needs reminders regarding handling assignments; unreliable, needs constant urging and direction; completely reliable in handling all assignments).

COMMENT:

7. **LEARNING ABILITY**
Consider employee’s willingness and ability to learn new duties. (e.g. requires repeated instructions and has difficulty adjusting to change; shows lack of initiative; grasps complex new ideas and tasks quickly; self-starter; able to learn new ideas at a normal pace; willing to learn and participate).

COMMENT:

8. Is dress and grooming appropriate for position? Yes ____ No ____
   Comment if no: __________________________________________________________

9. Comment on attendance, punctuality and use of working time. If there are any problems state action being taken: ____________________________________________

SUPERVISOR’S RECOMMENDATION

EMPLOYEE PROGRESS:

a) What are the major strengths shown by the employee? Comment:
   ________________________________________________________________

b) What are the weaknesses or areas in need of improvement? Comment:
   ________________________________________________________________

c) Recommended plan for improvement:
   ________________________________________________________________

PLEASE PREPARE FOR “FINAL RATING ONLY.”

Has demonstrated competence and ability for the position - RETAIN
Has not demonstrated competence and ability for the position – REJECT, or
EXTEND according to article 9.1.2

EMPLOYEE
I have reviewed this assessment with my supervisor and the following are my comments:

DATE: ___________________________ Signature: ___________________________

SUPERVISOR
I have reviewed this assessment with my employee and my comments are:

DATE: ___________________________ Signature: ___________________________

Reviewed by next level of management:

DATE: ___________________________ Signature: ___________________________
Return one copy to: Human Resources AH 435