

Central Georgia Technical College
 Performance Communication System
 (Support Staff, Employee Evaluation)

NAME OF EMPLOYEE _____

JOB TITLE _____ UNIT _____

NAME OF REVIEWER _____ DATE OF REVIEW _____

REVIEW PERIOD: FROM: _____ TO: _____ NEXT REVIEW DATE _____

- Rating Scale:
- | | |
|------------------------|----------------------------------------------------------------------|
| 1 Unsatisfactory: | Employee does not perform at an acceptable level |
| 2 Needs improvement: | Performs at minimum level; significant improvement necessary |
| 3 Meets requirements: | Consistently meets job requirements; performance is fully acceptable |
| 4 Highly satisfactory: | Occasionally exceeds job requirements of the position |
| 5 Exceptional: | Consistently exceeds job requirements of the position |

PERFORMANCE FACTORS:	1	2	3	4	5
<u>ACCOUNTABILITY</u> – Accepts responsibility for all aspects of assignments					
<u>ATTENDANCE/PUNCTUALITY</u> – Uses leave according to established policies; Reports to work on time and maintains scheduled hours.					
<u>COMMUNICATION</u> – (verbal & written) Uses good interpersonal skills with customers and other employees					
<u>CONTINUOUS LEARNING IMPROVEMENT</u> – Strives to improve knowledge and skills in relevant areas					
<u>CUSTOMER SERVICE</u> – Addresses customer needs, courteously, professionally, and efficiently.					
<u>DECISION MAKING</u> – Takes into consideration the probable results of actions when making decisions.					
<u>FLEXIBILITY</u> – Prioritizes effectively in order to meet deadlines; Adjusts quickly to new situations and customer expectations.					
<u>FOLLOW-UP</u> – Keeps appropriate personnel informed of work progress and related issues.					
<u>INITIATIVE</u> – Takes appropriate action without waiting to be told or without direction; Makes constructive suggestions to improve work methods and processes; Seeks out new responsibilities, undertakes new work when task is completed.					
<u>JOB KNOWLEDGE</u> – Knows what to do and how to do it (without assistance).					
<u>ORGANIZATIONAL ABILITY</u> – Efficiently organizes work and uses available Resources effectively.					
<u>TEAMWORK</u> – Contributes effectively to group projects, meetings, or team efforts; Effectively shares information and communicates with other employees and/or supervisor; When necessary, employee assists co-workers as needed; Effectively addresses and resolves conflict/problem situations; Demonstrates a team orientation by working cooperatively with fellow employees.					
<u>WORK QUALITY</u> – Work is accurate, timely and complete.					
<u>OVERALL RATING</u> (Average of all columns)					

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PROFESSIONAL DEVELOPMENT PLAN

Career and professional development goals; future training needs/plans based on any deficiencies noted or known changes in job or position.

COMMENTS: (Attach additional comments if necessary)

1. For rating less than “meets requirements,” state specifically what the employee does or fails to do which results in this evaluation. (Cite specific examples.) What specific actions are planned to improve performance?
(Check here _____ if additional notes attached.)

2. Supervisor’s general comments regarding performance, evaluation, and/or development plan. (Optional)
(Check here _____ if additional notes attached.)

3. Employee comments regarding performance, evaluation, and/or development plan. (Optional)
(Check here _____ if additional notes attached.)

Employee signature indicates they participated in the performance review, but does not indicate there is necessarily an agreement with the performance review. The next level supervisor should sign to indicate approval.

Employee’s Signature/Date

Supervisor’s/Reviewer’s Signature/Title/Date

Next Level Approval Signature/Title/Date