

# TELLER COUNTY EMPLOYEE PERFORMANCE APPRAISAL

NAME:

SUPERVISOR:

POSITION BEING EVALUATED:

DEPARTMENT:

APPRAISAL DATE:

EXEMPT:

NON-EXEMPT:

**INSTRUCTIONS:** Evaluate the employee on the job being performed for the period of \_\_\_\_\_ to \_\_\_\_\_. Circle the numeral of the response, which most nearly expresses your overall judgment on each attribute. Please provide **JUSTIFICATIONS** for your grading and **ACTIONS** to reinforce or enhance performance.

1. Dependability, Initiative, and Self-reliance:

Consider the employee's attendance, punctuality, adherence to policies and procedures. Consider the employee's ability to work independently and to develop creative solutions in the workplace.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

2. Organization, Efficiency, and Core Departmental Competencies:

Consider the employee's ability to prioritize work, appropriately allocate resources, and to accomplish the job at hand. Consider the employee's technical, professional, operational, and safety skills.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

3. Application of Knowledge and Professional Development:

Consider how the employee is able to practice and apply job experience and ongoing training. Consider the employee's efforts and commitment to ongoing professional development and to learn new duties and job requirements.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

4. Teamwork and Communications:

Consider the employee's working relationships with co-workers, colleagues, and supervisors. Consider how the employee communicates and interacts with others to improve the performance of the unit.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

5. Judgment and Quality of Work:

Consider how the employee's decision-making and problem solving affects the quality of the work. Consider the reliability, accuracy, and effectiveness of the employee's decisions.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

6. Customer Service:

Consider how the employee interacts with consumers, clients, and the public. Does the employee act appropriately and professionally?

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

7. Leadership:

Consider how the employee initiates or supports efforts to improve department performance. Consider how the employee leads by example and finds ways to motivate others.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

**To be completed for Management and Supervisory Personnel Only:**

8. Direction and Guidance:

Consider the adequacy and effectiveness of the directions and guidance provided to assigned staff in the performance of their work assignments.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATION:**

**ACTIONS:**

9. Employee Development:

Consider the quality of orientation and the extent to which training is provided to new employees. Consider the quality and effectiveness of training and professional development provided to employees.

4. Superior/Exceptional
3. Exceeds Expectations
2. Meets Expectation
1. Below Standards/Unacceptable

**JUSTIFICATIONS:**

**ACTIONS:**

**INSTRUCTIONS:** Based on the appraisal you have just completed, please answer the following questions in your own words.

1. Recap areas needed for improvement of performance factors.
  
  
  
  
  
  
  
  
  
  
2. Recap areas in which the employee exhibits outstanding attributes.

**OVERALL PERFORMANCE RATING (Circle One):**

Consider the overall contributions described above and circle the level that most accurately describes the performance review period.

- 4) Consistently exceeds basic job standards, or has shown superior / exceptional accomplishment during review period
- 3) Exceeds basic job standards
- 2) Meets all basic job standards
- 1) Below basic job standards / Unacceptable

EVALUATION PREPARED BY \_\_\_\_\_  
DATE: \_\_\_\_\_

EMPLOYEE SIGNATURE\* \_\_\_\_\_  
DATE \_\_\_\_\_

**\*NOTE:** Signature of employee acknowledges only that the appraisal was discussed with the employee. It does not imply agreement or disagreement with the appraisal.

DEPT. HEAD SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

ELECTED OFFICIAL / COUNTY MANAGER'S SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

**EMPLOYEE COMMENTS:** This page is reserved for the employee's comments to this evaluation. The employee may complete this section and return it to the Elected Official / Department Head within ten (10) working days of the evaluation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Acknowledgment of receipt of Employee Comments\*: \_\_\_\_\_  
Elected Official/Department Head/  
Supervisor

\*Acknowledgment does not imply agreement with Employee Comments.