**Classified Employee Evaluation and Goal Employee’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Review Form Employee’s ID # ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Indian Prairie School District #204 Conference Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FTE \_\_\_\_\_\_\_\_\_\_**

This form is used by supervisors of classified staff members who are working in part-time or full-time positions with the Indian Prairie School District #204. The classified employee’s immediate supervisor may complete the form. If the employee’s immediate supervisor is not a District administrator, the administrator who supervises the program or areas in which the classified employee works must sign the form. The signature of the employee who is being evaluated indicates that he/she has read the completed form. The employee’s signature does not necessarily mean that the employee agrees with the contents of the evaluation. The employee is entitled to write a response to the evaluation. The employee’s response shall be sent to the Assistant Superintendent for Human Resources within 10 days of receiving the employee’s formal evaluation. The written response will be attached to the evaluation form prior to placing it in the employee’s personnel file. Evaluations shall be completed by May 15th of the year the employee is being evaluated. The employee must be provided with a copy of the signed and completed evaluation.

**1. General Evaluation Categories Satisfactory Needs Improvement Unsatisfactory**

 *(To be filled out for all classified staff*)

* Adheres to district and school policies

and procedures \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Maintains a professional appearance and \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

demeanor

* Attendance/Punctuality – The employee is \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

on site and ready for work at the appropriate

time each day. The employee honors lunch and

break rules as well as rules relating to length of

the workday

* Handles confidential information appropriately. \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_
* Displays a cooperative and collaborative \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

attitude

* Responds to direction in a professional and \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

courteous manner

* Communicates and interacts in a positive, helpful

and courteous manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Follows safety policies and procedures \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_
* Performs assigned tasks in an effective,

efficient and well-organized manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Anticipates needs and responds in a timely \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

and appropriate manner

* Uses technology effectively to perform

job-related tasks \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**Comments or Explanations for General Categories Section:**

This section is available for listing employee commendations, suggestions for areas of improvement, or discussions of possible future focus related to the *General Category* items listed above.

**2. Position Classification** (Select the appropriate classification for the employee.)

# **Enrollment Assistant, Supported Education Satisfactory Needs Improvement Unsatisfactory**

# **Assistant, PSTA**

* Works with supervising teacher and

administrator to communicate and deliver

 student support in an effective and efficient

 manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Supports classroom and school routines,

procedures and rules \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

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* Uses approved behavior management

techniques and disciplinary procedures \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**LMC Assistant**

* Uses approved behavior management

techniques and disciplinary procedures \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Maintains records, library automation

 systems, and other documents in an

organized, accurate and readily

accessible manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Communicates effectively in written and

oral formats \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Supports classroom and school routines,

procedures and rules \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**Secretary, Health Office Assistant, Attendance Satisfactory Needs Improvement Unsatisfactory**

# **Clerks, Clerk/Receptionist, Science Lab**

# **Technician**

* Maintains records and other documents
* in an organized, accurate and readily

accessible manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

* Communicates effectively in a courteous

and respectful manner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**Pool Assistant, Dean Assistant, In School**

**Detention Assistant**

* Monitors student behavior according to \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

prescribed guidelines/procedures

* Supports classroom and school routines,

procedures and rules \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**Comments or Explanations for the Position Classification:**

This section is available for listing employee commendations, suggestions for areas of improvement, or discussions of possible future focus related to the *Position Classification* items listed above.

Supervisor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(The employee’s signature on this form does not necessarily mean that he/she agrees with this evaluation. The employee may submit a written statement about this evaluation to the Assistant Superintendent for Human Resources within ten (10) days of receiving formal evaluation.)