

EMPLOYEE PERFORMANCE APPRAISAL FOR UNIONIZED OR NON-EXEMPT STAFF

Employee _____ Title _____ Hire Date _____
Department _____ Supervisor _____ Appraisal Date _____

Degree of Performance (check appropriate numbered box)

Factors	Outstanding	Commendable	Average	Below Average	Unsatisfactory	Score
Quantity of Work Volume of work regularly produced; speed and consistency of output.	Unusual speed & volume of output. <input type="checkbox"/> 5	Output exceeds satisfactory job requirements. <input type="checkbox"/> 4	Output satisfies job requirements. <input type="checkbox"/> 3	Output below job requirements. <input type="checkbox"/> 2	Output inadequate to retain in job without improvement. <input type="checkbox"/> 1	
Quality of Work General excellence of output with consideration to accuracy, thoroughness, and effectiveness.	Unusual accuracy, thoroughness & effectiveness. <input type="checkbox"/> 5	Quality high, work very well done. <input type="checkbox"/> 4	Work satisfies quality requirements. <input type="checkbox"/> 3	Work does not satisfy quality requirements. <input type="checkbox"/> 2	Quality too poor to retain in job without improvement. <input type="checkbox"/> 1	
Dependability Extent to which employee can be counted on to meet deadlines and fulfill responsibilities including attendance and punctuality.	Extremely dependable. <input type="checkbox"/> 5	Exceeds normal job requirements. <input type="checkbox"/> 4	Can be relied on to fulfill job demands. <input type="checkbox"/> 3	Not fully dependable. <input type="checkbox"/> 2	Too unreliable to retain in job without improvement. <input type="checkbox"/> 1	
Initiative Extent to which employee is a "self-starter" in attaining job objectives, as well as assuming additional responsibilities and duties.	Extraordinary; beyond that which present job can fully utilize. <input type="checkbox"/> 5	Exercises initiative beyond job requirements. <input type="checkbox"/> 4	Exercises amount of initiative required by the job. <input type="checkbox"/> 3	Lacks initiative. <input type="checkbox"/> 2	Lacks sufficient initiative to retain in job without improvement. <input type="checkbox"/> 1	

Factors	Outstanding	Commendable	Average	Below Average	Unsatisfactory	Score
Supervision Required Extent to which employee needs supervision to be able to attain job objective.	Requires little or no supervision.	Requires less supervision than others.	Requires normal supervision.	Requires more supervision than others.	Requires too much supervision to keep in job without improvement.	
	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	
Knowledge of Job Duties, procedures, operation of equipment, and such policies as applicable (considering tenure in position).	Can perform a large variety of tasks beyond those required.	Can perform more than required tasks.	Can perform all required tasks.	Can perform limited number of required tasks.	Cannot perform required tasks.	
	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	
Customer Service Responding to and satisfying the requests and needs of all (internal and external) customers. Provides personal, friendly and courteous service.	Anticipates & continuously exceeds needs or expectations.	Exceeds needs or expectations.	Meets the needs.	Does not always meet the needs.	Generally unresponsive to needs.	
	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	

Objectives for Upcoming Review Period (at least 2 objectives) _____

Training Recommendations _____

Overall Performance Rating (Total Points)

32-35 points Outstanding

25-31 points Commendable

18-24 points Average

11-17 points Below Average

7-10 points Unsatisfactory

Total Points

Average Points

(Average = total points divided by 7 factors)

Prepared by (Supervisor's Signature) _____

Date _____

Evaluation Conference Comments _____

I had a conference with my supervisor regarding my performance appraisal, during which time we reviewed the factors determining the outcome of the appraisal.

I have read the above report and

- Wish to comment under separate cover.
- Do not wish to comment.

Employee's Signature _____

Date _____