



Bainbridge College
Performance Appraisal Instructions for
Classified Staff Employees and Non-Faculty Managerial/Professional Employees

General Instructions

This performance appraisal is designed for supervisors to assess the performance of their employees. Section I allows for "job specific" evaluation. Section II provides for a series of performance factors related to the job. Section III identifies training and future goals. The rating scale below should be used in each section. Upon completion of the appraisal, the supervisor should sign the document and obtain the necessary signatures of the reviewer and the employee.

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This Performance Appraisal Form is to be used for all job groups (both non-exempt and exempt).

Explanation of Rating Levels

Rating

| | |
|-------------------|--|
| Excels | Performance which is consistently better than that expected of a fully proficient employee. |
| Proficient | Performance which meets the expectations of an employee for this job classification. |
| Needs Improvement | Performance less than that of a fully proficient employee; improvement necessary. |
| Unsatisfactory | Performance that does not meet minimum job requirements; immediate and substantial improvement is necessary. |

**Rating Scale
(Check One)**

| Description of major responsibilities: | Excels | Proficient | Needs Improvement | Unsatisfactory |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 1) Goal/Objective/Project/Major Job Duty/Special Assignment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Goal/Objective/Project/Major Job Duty/Special Assignment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Goal/Objective/Project/Major Job Duty/Special Assignment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Goal/Objective/Project/Major Job Duty/Special Assignment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Goal/Objective/Project/Major Job Duty/Special Assignment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If other major responsibilities have been identified that have not been captured in any of the 5 responsibilities listed above please attach an additional sheet rating those responsibilities.

Identify any training or development activities the employee has completed since his/her last performance appraisal.

a.

b.

c.

Section II

Directions: In this section, the work factors tend to reinforce the performance levels identified in Section I. Place a check (✓) in the column that best identifies the employee's job performance and make comments as appropriate.

The supervisor's written comments can be the most important part of this appraisal section. For any rating other than "proficient" a comment is required.

If the employee is classified staff, please complete performance factors 1 through 11 and item 12, if applicable. If the employee falls in the Managerial/Professional category, please complete performance factors 1 through 16.

**Rating Scale
(Check One)**

| | Excels | Proficient | Needs Improvement | Unsatisfactory |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Performance Factors: | | | | |
| 1) <u>Job Knowledge/Skills</u> To what extent does the employee maintain a satisfactory level of job knowledge and job skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 2) <u>Quality of Work</u> To what extent does the employee's work meet the required quality standards, i.e., accuracy, neatness and thoroughness? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 3) <u>Productivity</u> To what extent does the employee accomplish the quantity of work expected of the job assigned and use time and resources appropriately? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | | |
|--|--|--|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Comments: | | | | | | | |
| | | | | | | | |
| 4) <u>Record Keeping/Documentation</u> To what extent does the employee adequately prepare and maintain records, written reports, correspondence, and files? | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | | | | |
| | | | | | | | |
| 5) <u>Reliability</u> To what extent does the employee perform work consistently without close supervision or assistance? | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | | | | |
| | | | | | | | |
| 6) <u>Adaptability</u> To what extent does the employee readily adapt to new situations and changes in routines, work load, and work assignments? | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | | | | |
| | | | | | | | |
| 7) <u>Initiative</u> To what extent does the employee present new ideas, improve procedures or otherwise demonstrate an awareness of clerical or technical changes related to the job, and take appropriate action without instruction or urging? | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | | | | |
| | | | | | | | |
| 8) <u>Attendance</u> To what extent does the employee maintain satisfactory attendance in regard to tardiness, early departures, absences, and working assigned schedule? | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Comments: | | | | |
| 9) <u>Relations with others</u> To what extent does the employee establish effective working relationships when dealing with others (supervisors, co-workers, patients, the public, etc.) and promote the effectiveness of other employees? | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 10) <u>Customer Service</u> To what extent does the employee demonstrate excellence in customer service when dealing with students, faculty, staff, patients, and the public? | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 11) <u>Adhere to Policies and Procedures</u> To what extent does the employee follow _____ and department specific policies and procedures (i.e., safety, dress policy, professionalism, and administrative policies and procedures)? | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 12) <u>Department Specific Performance Factor</u> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| Managerial/Professional Staff | | | | |
| 13) <u>Planning and Analytical Ability</u> To what extent does the employee demonstrate the skills to analyze, solve problems, and prioritize? | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Comments: | | | | |
| 14) <u>Managerial Skills</u> To what extent does the employee effectively work well with and through others to complete assignments in a timely and productive manner demonstrating a commitment to customer service? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 15) <u>Mentoring of Others</u> | | | | |
| a) To what extent does the employee guide/encourage others to become more effective in work assignments and better prepared for future professional development? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| b) To what extent does the employee effectively evaluate others, ensuring productive work in support of the college/school/division's strategic plan, including the development of an Employee Development Plan or Performance Improvement Plan when needed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |
| 16) <u>Communication Skills</u> To what extent can the employee effectively express himself/herself orally and in writing including correspondence, reports, and presentations at conferences, seminars, workshops, etc., as required by the job? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | | |

Section III

Directions: This section will be used to identify areas in which job performance has been significantly above average, areas where performance improvement is needed and an action plan to achieve improvement, development and training recommendations to enhance and/or develop new skills, and goal/objectives for the upcoming year.

A. Supervisor's Comments (Job Performance)

1. Areas in which job performance has been significantly above average:

2. Areas in which job performance can be enhanced through further development and recommended strategies or programs for achieving such:

3. Areas in which job performance improvement is needed and reasons why improvement is needed:

| Employee Action Plan | | | |
|--|---------------------------|----------------------|-----------|
| Area of Performance or Conduct Requiring Improvement | Why Improvement is Needed | Expected Performance | Time Line |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

B. Development and Training

Indicate recommendations for further development and training for purposes of preparing the employee for additional responsibilities or for the improvement of current job performance.

a.

b.

c.

C. Future Development Goals/Objectives

List goals/objectives/special projects to be accomplished by the next annual appraisal. Include the employee's professional development as well as departmental objectives, which have been mutually agreed upon and which support the College's/School's/Division's Strategic Plan.

a.

b.

c.

Section IV

Directions: This section should be used for the supervisor to rate the overall performance, obtain requested signatures, and the employee's comments. The overall performance rating should be used in determining the employee's merit increase recommendation, if any. The employee's merit increase is contingent upon performance continuing at the same level.

If an employee's rating is below proficient, an Employee Action Plan (Section III, A.3) is required. This section can also be used to update a past action plan.

A) Overall Performance Rating

| <u>Rating</u> | <u>Explanation of Rating Levels</u> |
|-------------------|--|
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| Proficient | Performance which meets the expectations of an employee for this job classification. |
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| Unsatisfactory | Performance that does not meet minimum job requirements; immediate and substantial improvement is necessary. |

Excels Proficient Needs Improvement* Unsatisfactory*

* Employee Action Plan (Section III, A.3) is required.

Signatures (Manager or Supervisor & Employee) and Employee Comments

Evaluated by _____ Title _____
(Immediate Supervisor)

Reviewed by _____ Title _____

TO THE EMPLOYEE

You are requested to sign on the line provided below to indicate only that you have had an opportunity to review and discuss your performance appraisal with your supervisor.

Employee's Signature _____ Date _____

Employee's Comments (optional):