

# Performance Appraisal

PLEASE PRINT

Employee Name Leipelt Steve Title M.C.T. I

Department \_\_\_\_\_ Employee Payroll # \_\_\_\_\_

Reason for Review  Annual  Promotion  Unsatisfactory Performance  
 Merit  End of Probation Period  Other SEMI-ANNUAL

Date employee began present position \_\_\_/\_\_\_/\_\_\_ Date of last appraisal 6/29/97 Scheduled appraisal date \_\_\_/\_\_\_/\_\_\_

**Instructions:** Carefully evaluate employee's work performance in relation to the essential functions of the job. Check rating box to indicate the employee's performance. Indicate N/A if not applicable. Assign points for each rating within the scale and write that number in the corresponding points box. Points will be totaled and averaged for an overall performance score.

## Definitions of Performance Ratings

**O - Outstanding** - Performance is exceptional in all areas and is recognizable as being far superior to others.

**V - Very Good** - Results clearly exceed most position requirements. Performance is of high quality and is achieved on a consistent basis.

**G - Good** - Competent and dependable level of performance. Meets performance standards of the job.

**I - Improvement Needed** - Performance is deficient in certain areas. Improvement is necessary.

**U - Unsatisfactory** - Results are generally unacceptable and require immediate improvement. No merit increase should be granted to individuals with this rating.

**N/A - Not Applicable** or too soon to rate.

General Factors	Rating	Scale	Points	Supportive Details or Comments
1. <b>Quality</b> - The extent to which an employee's work is accurate, thorough and neat.	O <input type="checkbox"/> V <input checked="" type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	85	Quality Source Treatments
2. <b>Productivity</b> - The extent to which an employee produces a significant volume of work efficiently in a specified period of time.	O <input type="checkbox"/> V <input checked="" type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	85	Production same as last evaluation period
3. <b>Job Knowledge</b> - The extent to which an employee possesses the practical/technical knowledge required on the job.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	N/A	N/A
4. <b>Reliability</b> - employee can task complete	O <input type="checkbox"/> V <input type="checkbox"/> G <input checked="" type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	71	Decrease in Reliability Failed To Keep Work Comp Appt.
5. <b>Attendance</b> - employee is pt work break/me acceptable ove	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	N/A	Same amount sick leave used as in last evaluation period
6. <b>Independence</b> - employee perf no supervision	O <input type="checkbox"/> V <input checked="" type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	80	Receives Regular Supervision

THIS CATEGORY MAY BORDER ON NEED FOR IMPROVEMENT →

YOU HAVE HIM AS "GOOD" SAME AMOUNT AS WHAT? →

General Factors	Rating	Scale	Points	Supportive Details or Comments
7. Creativity – The extent to which an employee proposes ideas, finds new and better ways of doing things.	O <input type="checkbox"/> V <input checked="" type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	85	Good Ideas For zone work
8. Initiative – The extent to which an employee seeks out new assignments and assumes additional duties when necessary.	O <input type="checkbox"/> V <input checked="" type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	85	Shows INITIATIVE
9. Adherence to Policy – The extent to which an employee follows safety and conduct rules, other regulations and adheres to company policies.	O <input type="checkbox"/> V <input type="checkbox"/> G <input checked="" type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	71	(Decrease) Failed To contact office (7:30 am) Next working day after being hurt
10. Interpersonal Relationships – The extent to which an employee is willing and demonstrates the ability to cooperate, work and communicate with coworkers, supervisors, subordinates and/or outside contacts.	O <input type="checkbox"/> V <input type="checkbox"/> G <input checked="" type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	79	(Decrease) SEE # 944
11. Judgment – The extent to which an employee demonstrates proper judgment and decision-making skills when necessary.	O <input type="checkbox"/> V <input type="checkbox"/> G <input checked="" type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100-90 89-80 79-70 69-60 Below 60	79	ACTIONS CAUSED EXTENSION OF Probation Period

Rate employee's overall performance in comparison to position duties and responsibilities.

Total Points **720** ÷ Number of Factors Rated **9** = **80** Overall Rating

Outstanding 100 - 90  
 Very Good 89 - 80  
 Good 79 - 70  
 Improvement Needed 69 - 60  
 Unsatisfactory Below 60

**Complete all of the following sections.**

- Accomplishments or new abilities demonstrated since last review Removed From Probation
- Specific areas of needed improvement Improve in # 4 # 9 # 10
- Recommendations for professional development (seminars, training, schooling, etc.) \_\_\_\_\_
- Absences: Number of incidents \_\_\_\_\_ Number of days 62 Days (Sick)

**Additional Employee Comments** \_\_\_\_\_

Discussed with individual on 1/1 Employee's Signature\* \_\_\_\_\_  
\*I acknowledge that this Performance Appraisal was discussed with me.

Follow-up requested/desired  Yes  No Follow-up Date 1/1

Evaluator's Signature [Signature] Date 1/21/98