



CONFIDENTIAL PERFORMANCE APPRAISAL GROUP “D”

Performance Appraisals should be completed, shown to and shall be discussed with the employee, signed by all the parties after discussion, and forwarded to the Human Resources Dept. as per instructions. Supervisors are to refer to accompanying guide before appraising the employee.

Name: _____ Employee#: _____

Position: _____

School/Department: _____ Date: _____

The following appraisal is for:

PROBATIONARY EMPLOYEE

REGULAR EMPLOYEE

Report #1___ #2___ #3___

Trial Report #1___ #2___

Other___

Legend:	
E	Exceeds - Significantly and consistently exceeds the job requirements
M	Meets – Consistently meets the job requirements
ID	Improvement Desired - Does not yet meet the job requirements, some improvement required
IE	Improvement Essential – Significantly below the job requirements, improvement required
NA	No opportunity or not applicable -Staff member has not had an opportunity to perform this duty

DEMONSTRATED SKILLS AND ABILITIES	E	M	ID	IE	NA
Sound knowledge of District procedures, practices and routines as required for the position					
Supervises and/or provides direction/training to staff					
Effectively responds to enquires and provides required information					
Maintains routine bookkeeping records and develops departmental records					
Composes a variety of correspondence, prepares reports and other written material					
Reconciles and processes accounts, non-standard invoices and general financial statements					
Proficient use of a variety of computer applications, programs and network systems including:					
A: Excel (spreadsheet software)					

B: Word (word processing software)					
C: Other (specify):					
Operates and maintains various office equipment					
Inputs data accurately and efficiently					
Respects confidentiality					
Performs other duties as assigned or as required:					
A.					
B.					
C.					
SUPPORTING COMMENTS:					
COMMUNICATION AND TEAM WORK	E	M	ID	IE	NA
Communicates effectively with students, the public and outside agencies if required					
Communicates effectively at all levels within the organization					
Maintains a professional relationship with co-workers					
Participates effectively as a member of a team					
Understands and acts upon instructions, information and feedback					
Maintains a positive and collaborative attitude					
SUPPORTING COMMENTS:					
PLANNING AND ORGANIZATION	E	M	ID	IE	NA
Establishes priorities and organizes time effectively					
Responds effectively to established timelines and parameters despite constant interruptions					
SUPPORTING COMMENTS:					
ADAPTABILITY, FLEXIBILITY	E	M	ID	IE	NA
Adapts and responds to the changing needs of the position, school or department					
Accepts responsibility and works independently					

SUPPORTING COMMENTS:					
INITIATIVE	E	M	ID	IE	NA
Takes initiative to suggest improvements to procedures					
SUPPORTING COMMENTS:					
PROBLEM SOLVING	E	M	ID	IE	NA
Demonstrates ability to solve problems related to work					
SUPPORTING COMMENTS:					
WORK HABITS	E	M	ID	IE	NA
Attends work on a regular basis					
Starts work on time and returns from breaks when required					
SUPPORTING COMMENTS:					

SUPERVISOR COMMENTS :

EMPLOYEE COMMENTS:

Has the employee been counselled on how to improve any areas marked Improvement Essential or Improvement Desired?
Yes ___ No ___
Explain:

RECOMMENDATIONS:

Probationary or Trial Period Report: Retain Employee YES___ NO___
Other Period Report: Retain Employee YES___ NO___

ACKNOWLEDGEMENTS:

Performance Appraisal was reviewed with the employee on _____
Date

Signature of Employee

Signature of Supervisor

Signature of Supervisor

NOTE: *The employee's signature does not constitute agreement with the appraisal; it simply acknowledges that the employee has had the opportunity to read and discuss the report.*

Development Plan (optional):

Name: _____ Employee#: _____

Position: _____

School/Department: _____ Date: _____

Describe the goals set for the next performance reporting period.	
Goals:	
1.	
2.	
3.	
Outline the professional development activities planned for the next review period that will assist in achieving these goals.	
Activities:	Date to be Completed:
1.	
2.	
3.	

The appraisal forms are to be distributed as follows:

- **The original to Human Resources**
- **A copy for your files**
- **A copy for the employee**
- **A copy to the union (CUPE local 728)**