



WELLPINIT SCHOOL DISTRICT #49

PO Box 390 / 6270 Ford-Wellpinit Road Wellpinit WA 99040
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WELLPINIT SCHOOL DISTRICT NO. 49 CLASSIFIED EVALUATION FORM

Name: _____ Position: _____

Date: _____

The main purpose of this appraisal is to improve effectiveness and performance. The appraisal should be based upon observable behavior and workmanship.

	EXCEEDS EXPECTATIONS	MEETS EXPECTATIONS	NEEDS IMPROVEMENT	DOES NOT MEET EXPECTATIONS
A. Knowledge & Scholarship in Special Field				
1. Understanding of all phases of the job.....				
2. Promptness of required reports, etc.....				
3. Maintaining sanitary conditions and safety.....				
4. Exhibit tact, courtesy and public relations.....				
B. Specialized Skills				
1. Maintains quantity of satisfactory work produced.....				
2. Neatness, accuracy, workmanship and excellence in work produced.....				
C. Management of Special & Technical Environment				
1. Cooperation in following instructions.....				
2. Ability to function in a positive manner with fellow employees.....				
3. Ability to initiate action.....				
4. Ability to manage own work station.....				

	EXCEEDS EXPECTATIONS	MEETS EXPECTATIONS	NEEDS IMPROVEMENT	DOES NOT MEET EXPECTATIONS
D. The Support Person As A Professional				
1. Neatness and good grooming.....				
2. Physical health & stamina necessary to meet responsibility required by the job.....				
3. Attendance and punctuality.....				
4. Good judgment and soundness of reasoning.....				
E. Involvement in Assisting Pupils, Parents and Educational Personnel				
1. Enforcement of rules and policies.....				
2. Leadership qualities.....				
3. Courtesy to others.....				
4. Commitment to job and organization.....				

A. If "Exceeds Expectations," "Needs Improvement," or "Does Not Meet Minimum Requirements" are marked, then specific supporting comments are required.

B. Identify prescribed steps recommended to be taken to improve performance to acceptable level if "Does Not Meet Minimum Requirements" or "Needs Improvement" is marked.

C. I recommend this employee to be re-evaluated in _____ days.

Check One:

- At the present time I would recommend re-employment.
- At the present time I would hesitate to recommend re-employment.
- At the present time I would not recommend re-employment.

Date _____

Supervisor

Employee

Choice of work assignment for 2006-2007 _____