



# Associated Students, Inc./U-SU Staff Performance Evaluation

<b>Name:</b>	<b>Division:</b> Student Life	<b>Employee ID:</b>
<b>Department:</b> Associated Students, Inc.	<b>Classification Title:</b>	<b>TYPE OF REPORT:</b> *Based on 40 hr time base. X Permanent - Annual
<b>Period of Time Covered by Evaluation:</b>	<b>Date Draft Given to Employee for Review (Annual only):</b> *Draft Evaluation given to employee at least 5 days prior to finalization.	
<b>Date Discussed with Employee:</b>		

When a recommendation of *Rejection During Probation* is being made, it should be submitted to the immediate supervisor in a separate memorandum. A rejection during probation memorandum should be submitted earlier than the third evaluation, if possible. If the rejection recommendation coincides with the third evaluation, it should be attached to this form.

	CATEGORY RATINGS Check each category in the appropriate column.	Unacceptable (Fails To Meet Minimum Standards)	Marginal (Needs Improvement)	Satisfactory (Meets Standards)	Commendable (Exceeds Standards)	Outstanding (Substantially Exceeds Standards)	Not Applicable	COMMENTS: Describe job strengths, progress toward goals, problems, plans, and, as appropriate, areas where additional training will be provided.  An explanation with specific examples of all check marks other than "Satisfactory" is required and is strongly encouraged if "Satisfactory" is selected.  Use attachments as needed. The employee and supervisor should sign all attachments.  Additional categories may be evaluated so long as the items being evaluated are clearly communicated to employees early in the evaluation period. Consult with the immediate supervisor if you wish to add evaluation categories.  *Categories 1, 2, 3, and 4 are to be weighed more heavily than other categories because job skills, quality/accuracy of work, productivity and customer service tend to measure the fundamental effectiveness of job performance.
*1	Job Skills							
*2	Quality/Accuracy of Work							
*3	Productivity							
*4	Customer Service							
5	Accepts Responsibility							
6	Meets Deadlines							
7	Adapts to Change							
8	Accepts Supervisor's Direction							
9	Shows Initiative							
10	Communication Skills							
11	Observance of Work Hours							
12	Attendance							
13	Safety Practices/Care of Equipment							

For Employees with Supervisory Responsibilities (Including Staff and Student)									Signature of Immediate Supervisor:
14	Equal Employment Practices								Name:
15	Selection								Position:
16	Motivating Staff								Signature _____
17	Training of Others								Date _____
18	Planning & Organizing								
19	Directing & Controlling								
20	Delegation								
21	Operational Economy								
22	Evaluation of Others								
23	Discipline								

<p><b>SUMMARY EVALUATION:</b> Must be supported by the ratings above</p> <p style="text-align: center;"> <input type="checkbox"/> Unacceptable    <input type="checkbox"/> Marginal  <input type="checkbox"/> Satisfactory   <input type="checkbox"/> Commendable   <input type="checkbox"/> Outstanding         </p> <p>Immediate Supervisor Signature</p> <p>Signature _____ Date _____</p>	<p>I have received a copy of this evaluation. I have read it and it has been discussed with me. Signing does not reflect that I agree or disagree with the evaluation.</p> <p>Signature of Employee:</p> <p>Signature _____</p> <p>Date _____</p> <p>-----</p> <p>I desire review by the second level supervisor:    Yes <input type="checkbox"/></p> <p>Signature _____</p> <p>Date _____</p>
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**Comments:**

**Employee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Immediate Supervisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_