

Professional Support Personnel Evaluation

Employee Name: Department:

Title: BOCES Supervisor:

Evaluation Date: Conference Date:

DIRECTIONS: The employee will complete this evaluation form and then submit it to his or her supervisor. Once the supervisor has added his or her ratings and comments, a conference will be held to discuss the completed document.

5 = Exceptional

4 = Highly Effective

3 = Effective

2 = Needs Improvement

1 = Unsatisfactory

Note: (1) or (2) checks must be accompanied by recommendations for improvement in the comments section.

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| JOB KNOWLEDGE: has technical knowledge, understands, and executes all duties and assignments of job title |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| QUALITY OF WORK: work completeness, accuracy, and understanding of directions, procedures, and policies; maintenance of an organized work environment |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| COLLABORATION: works collaboratively with peers, supervisors and the public; responds to inquiries promptly and tactfully in a professional manner |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| PROFESSIONALISM: ability to set goals and priorities; is professional in approach to the position; shows initiative; accepts suggestions, directions, and constructive feedback; understands and responds to needs and requirements of others |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| JUDGMENT: demonstrates thoughtful decision-making; resourceful; anticipates needs; manages time well; maintains confidentiality |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| PROFESSIONAL GROWTH: demonstrates flexibility; openness to new technology and procedures; participates in Professional Development when available |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| DEMEANOR: has an even disposition; approachable; keeps calm under stress; accepts criticism; diplomatic and tactful; listening skills; self-motivated |  |  |  |  |  |  |  |  |  |  |  |

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|  |  | *Employee* | | | |  |  | *Supervisor* | | | |
|  | 5 | 4 | 3 | 2 | 1 |  | 5 | 4 | 3 | 2 | 1 |
| ATTENDANCE: maintains good attendance, punctual |  |  |  |  |  |  |  |  |  |  |  |

\*\*\* The Employee Comments and/or Feedback section is for the Unit Member to reflect on things they want their supervisor to know, aspirations they have, things that may improve the work environment, training and/or professional development they would like to receive in order to improve their skills, etc…

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| Employee Comments and/or Feedback: |
| Supervisor Comments: |

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Employee’s Signature Date

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BOCES Supervisor’s Signature Date

cc: Employee

BOCES Supervisor

Personnel File

Rvsd 5/23/19 DFG