

Riverside Community College District

PERFORMANCE EVALUATION FOR CLASSIFIED PROMOTIONAL EMPLOYEES

Employee:	Job Title:
Department:	Evaluation Period: From: To:
Evaluator:	Evaluator's Supervisor:
Date the evaluator initially reviewed the employees job description, duties, and responsibilities with them:	
2 - Month <input type="checkbox"/>	5 - month <input type="checkbox"/>

PERFORMANCE EXPECTATIONS & OBJECTIVES

(Check the appropriate box. 1 is Satisfactory, 2 is Needs Improvement, and N is Not Applicable)

1 2 N
☐ ☐ ☐

Performs duties, functions and job responsibilities efficiently

1 2 N
☐ ☐ ☐

Develops and maintains positive staff relationships

☐ ☐ ☐

Serves responsibly as a team member or Management or Executive Cabinet member as applicable

☐ ☐ ☐

Makes substantive contributions toward the RCCD mission and administrative objectives

☐ ☐ ☐

Demonstrates effective communication skills

☐ ☐ ☐

Responds well to student and/or staff needs

☐ ☐ ☐

Displays good management and leadership competencies (if applicable)

☐ ☐ ☐

Possesses appropriate interpersonal skills for this position

☐ ☐ ☐

Has made progress in achieving outlined job objectives

Other rating factors (please include in comments section or below)

A feedback narrative is required (attach separate sheet if necessary)

OVERALL PERFORMANCE RATING – check box 1a, 1b, 2, or 3

☐

1a.

Satisfactory.

☐

1b.

Satisfactory. Probation completed. Eligible for permanent status

☐

2.

Needs Improvement: specific examples of deficiencies are cited below or in attachments

☐

3.

Unsatisfactory: Release during probation. Consult with HRER for proper paperwork and procedure.

Comments:

EMPLOYEE'S REVIEW

Remarks by employee (optional):

Employee's signature indicates that he/she has reviewed this report. It does not necessarily mean that he/she is in agreement with the remarks or rating. I have reviewed this report with my supervisor.

Employee

Date

Evaluator

Date

Evaluators Supervisor

Date

VC, HR & Employee Relations/designee

Date