

3-Month Classified Employee Self-Evaluation and Supervisor Evaluation

	Title I Assistant	
Employee	Position Title	Probation End Date

- 0. Not Applicable or Observed
- 1. Unsatisfactory Performance
- 2. Average Performance

- 3. Expected Performance
- 4. Exceeds Expected Performance

E=Employee
S=Supervisor

E	S	<u>I. Personal Qualities</u>
		Presents a positive attitude by appearance, personal neatness, personal habits and punctuality.
		Communicates & works cooperatively with other members of the staff & public.
		Is neat in appearance and dresses appropriately for the position.
		Maintains confidentiality and honesty in performing assigned tasks.

Category Evaluation

	Employee		Supervisor
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E	S	<u>II. General</u>
		Prepares for classroom activities
		Works with groups of students
		Assists individual children in the classroom
		Guides work set up by teacher
		Assists in drill work
		Participates in in-service training
		Follows District policy/handbook
		Uses the computer for a daily check.

		Enters data for all required reports in an accurate & timely manner.
		Other duties as assigned

Category Evaluation

	Employee		Supervisor
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E	S	<u>III. Timeliness</u>
		Turns in time sheet as required
		Keeps time sheet current
		Meets deadlines
		Attends meetings as required
		Arrives on time and works scheduled hours.
		Manages time properly.
		Notifies the principal in event of illness

Category Evaluation

	Employee		Supervisor
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1. I feel I have shown development and growth in my position because: (list classes taken, workshops attended, independent study, etc.)

2. Commendations or areas during the last year for which I would like to be recognized are:

3. List areas of participation and/or accomplishment outside the position responsibilities that are job related: (i.e. site councils, committees, task forces, clubs, activities, coaching, etc.) Do not include community or civic activities outside of your job description.

Overall Evaluation

<input type="checkbox"/>	Employee	<input type="checkbox"/>	Supervisor
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Evaluator's Recommendation for:

- Continued Employment
 Plan of Assistance
 Termination

Comments:

Evaluator's Signature

Date

I have read this appraisal of my performance and discussed it with the evaluator.

Employee's Signature

Date

Statement by employee attached. Yes No