**Hourly Performance Review**

**Year: 2018**

Employee Name: Click here to enter text.

Supervisor Name: Click here to enter text.

Department: Click here to enter text.

Position: Click here to enter text.

Employee College ID#:  Click here to enter text.

Supervisor College ID#: Click here to enter text.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Performance Ratings for the Year** | | | | | | | |
| **Competency Areas** | **Unacceptable** | **Needs Improvement** | **Good**  **Solid**  **Performance** | **Outstanding** | **Examples, Comments and Suggestions for Improvement** | | |
| **Job Knowledge**  *Understands job objectives, duties and job responsibilities.* |  |  |  |  |  | | |
| **Technical Knowledge**  *Show proficiency in methods, techniques, and equipment necessary to accomplish work.* |  |  |  |  |  | | |
| **Quality of Work**  *Sets work standards and achieves results that are accurate, thorough, dependable and useful.* |  |  |  |  |  | | |
| **Decision-Making**  *Analyzes facts and situations prior to initiating action and problem-solving.* |  |  |  |  |  | | |
| **Initiative**  *Handles unforeseen difficulties successfully, develops new ideas and does not require close supervision.* |  |  |  |  |  | | |
| **Diversity/Inclusion**  *Advocates and embraces an inclusive and culturally competent workplace.* | ☐ | ☐ | ☐ | ☐ |  | | |
| **Communication**  *Communicates with appropriate tone, clarity, and timelines. (Both oral and written communication).* | ☐ | ☐ | ☐ | ☐ |  | | |
| **Customer Service**  *Acts as an ambassador for the college with internal and external customers.* |  |  |  |  |  | | |
| **Attitude/Teamwork**  *Contributes to positive and productive workplace relationships. Courteous, flexible and cooperative.* |  |  |  |  |  | | |
| **Dependability**  *Fulfills responsibilities and commitments and can be counted on to carry out instruction.* |  |  |  |  |  | | |
| **Time Mgmt./Attendance**  *On time or early to worksite. Prioritizes responsibilities and uses time wisely.* |  |  |  |  |  | | |
| **Safety/Policy**  *Completes work in a safe way and follows all college and departmental policies and safety rules.* |  |  |  |  |  | | |
| **Other (Job Specific)** |  |  |  |  |  | | |
| **Other (Job Specific)** |  |  |  |  |  | | |
| Overall Performance for the Year | | | | | | | |
| ***Evaluate how well the employee achieved the previous year’s goals and objectives. Include employee’s contributions and achievements.***  Click here to enter text. | | | | | | | |
| Final Review Signatures | | | | | | | |
| Employee Signature | | | | | | Date | |
| Supervisor Signature | | | | | | Date | |
| VP or Department Head Signature | | | | | | Date | |
| Employee Comments (additional sheet may be attached if needed) | | | | | | |
|  | | | | | | |

*Final* signed *copy should be routed to the VP/Dept. Head for signature and then HR for inclusion in the employee’s file.*