SANTA BARBARA COMMUNITY COLLEGE DISTRICT
PERFORMANCE REPORT – CLASSIFIED SERVICE EMPLOYEES

Last Name
First
Initial

Class Title
Department

Due to HR/LA:
Supervisor

Evaluation:
☐ 4 month ☐ 8 month ☐ 11 month (permanency)
☐ Annual ☐ 4/6 month promotional ☐ Special

Refer to CSEA Agreement Article regarding Evaluation

OUTSTANDING – Consistently exceeds performance standards.
ABOVE AVERAGE – Often exceeds performance standards.
SATISFACTORY – Meets performance standards.
MARGINAL – Needs to improve to meet minimum performance standards.
UNSATISFACTORY – Fails to meet minimum performance standards.

Instructions to Referee: Please read basis for evaluation (attached) before completing this form. Check the appropriate box, which indicates the employee's performance for the factors that apply. Use comments section below as needed to explain ratings. Additional sheets may be attached.

1. Quality of Work
2. Quantity of Work
3. Work Habits
4. Work Attitudes
5. Relationships with Others
6. Personal Qualities
7. Leadership Ability (where applicable)
8. Professional Development – refer to Career Success and Satisfaction Plan

COMMENTS: Referrals of "Marginal" or "Unsatisfactory" must be supported by a statement of facts. Specific suggestions to aid employee in improving performance must be attached. Compliments and special commendations should also be made if applicable. Mutually developed goals and objectives are also recommended for annual performance evaluations.

Supervisor's Signature
Title
Date

Employee's Signature
Title
Date

Employee's Initials

This report has been discussed with me. Signing this form does not necessarily mean that I agree with all the ratings. A copy of this Performance Report will be placed in my personnel file. I understand that I have the right to submit a response to my Performance Report. This response is to be attached to my evaluation and placed in my personnel file.

DISTRIBUTION: HR/LA (white), employee (yellow), supervisor (pink)
June 2006