

**Santa Barbara Community College  
District Classified Employee Evaluation**

Employee Name \_\_\_\_\_ Classification \_\_\_\_\_  
Department/Division \_\_\_\_\_ Employment Date \_\_\_\_\_ Evaluation Period \_\_\_\_\_  
Permanent Employee (Annual) ☐ Improvement Plan Evaluation ☐ 3<sup>rd</sup> month Promotional ☐ 5<sup>th</sup> month Promotional ☐  
Probationary Employee ☐ 4th Month ☐ 8th Month ☐ 11th Month (Determine Permanency) ☐

Review the dimensions of performance: under each category, comment on the employee's accomplishments and challenges during the evaluation period. Indicate the level of performance achieved using the following scale:

- 5=Outstanding (Consistently exceeds expectations)  
4=Exceeds Expectations (Often exceeds expectations)  
3=Meets Expectations (Performs according to job description)  
2=Needs Improvement (Improvement necessary to meet performance standards)  
1=Unsatisfactory (Fails to meet acceptable performance standards)

**PLEASE NOTE: Individual category ratings must be in whole numbers**

- 1) **Quality of Work:** Demonstrates satisfactory knowledge of the job. Performs work with acceptable accuracy and is thorough in the work done. Displays commitment to excellence; looks for ways to improve and promote quality. Work is neat and presentable. Demonstrates ability to use current technology in performing job duties.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

- 2) **Quantity of Work:** Volume of work regularly produced within established schedules and deadlines that meet job requirements and guidelines. Demonstrates efficiency in use of time and resources including effective modes of communication i.e. email, telephone. Consider the degree to which the staff member has used funds, staff, or equipment economically and effectively.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

- 3) **Work Habits:** Reports to work on time; complies with reporting standards for attendance; takes appropriate breaks and meal periods. Carries out tasks in an orderly and diligent manner. Carries out the responsibilities of the position with minimal supervision and guidance. Complies with instruction, rules and regulations, including health and safety precautions.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

- 4) **Work Attitudes:** Endeavors to improve work techniques. Accepts new ideas and procedures. Is cooperative and willing to accept supervisor's suggestions for improvement. Accepts responsibility willingly within the job description guidelines. Balances individual and department responsibilities; works effectively as part of a group. (3, District proposal)

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

**Commented [PJ1]:** Green is current language  
Blue is new language

- 5) **Relationships with others:** Acts in a manner that reflects respect, collaboration, courtesy, civility, and appreciation. Gets along well with fellow staff, student and the public. Cooperates with supervisor and others. Observes established channels of communication. Keeps relations with students and faculty on a friendly and impersonal level. Consider the degree to which the staff member demonstrates professionalism courtesy in interactions and attempts to understand and respond to the needs of others who are internal or external to the department and/or College. (Customer Focus, District)

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

- 6) **Performance-based Personal Qualities:** Acts with good judgement. Demonstrates initiative and drive. Is adaptable to emergencies and new situations. Demonstrates problem solving skills and knows when to bring a problem forward to the supervisor.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

- 7) **Leadership Ability Leading Others:** Demonstrates effective leadership. Is fair and impartial in relationships with co-workers. Makes good and timely decisions. Trains and instructs co-workers effectively. Plans, schedules and makes assignments fair and impartially. Motivates others toward common goals, integrates changes, demonstrates ability to coach, mentor, train and develop others.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 ☐ N/A  
Comments:

- 8) **Professional Development:** Participates in the Professional Growth Program. Takes initiative to identify and participate in professional development and career goals. takes initiative to meet goals of Career Success and Satisfaction Plan. Applies professional development training concepts to work assignment. Shares knowledge gained through professional development with others.

Rating: ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1  
Comments:

**Employee to initial one option:**

\_\_\_\_ I have performed work outside my current Board approved job description in the past calendar year.

\_\_\_\_ I have not performed work outside my current Board approved job description in the past calendar year.

\_\_\_\_ I have been asked by my supervisor to perform new duties in the past calendar year. I am unclear as to whether or not these duties are included in my current Board approved job description. I am requesting a meeting with my supervisor, Human Resources, and my labor representative in order to receive clarification.

**Performance Goals**

**Section 1) List goals accomplished during this evaluation cycle.**

**Section 2) List goals established for the next evaluation cycle.**

**Overall Work Performance**

Please calculate the overall performance rating by averaging out the scores above. The formula is as follows: add the points for each applicable category and divide the total number of points by the number of applicable categories.

Overall performance rating (round to the nearest tenth) \_\_\_\_\_

Please check the employee's overall rating:

☐ 5 = Outstanding   ☐ 4 = Exceeds Expectations   ☐ 3 = Meets Expectations   ☐ 2 = Needs Improvement   ☐ 1 = Unsatisfactory

**For probationary employee only, recommend:**

- ☐ Grant Permanent Status
- ☐ Continue Probationary Period (4th and 8th month evaluation only)
- ☐ Discontinue Employment of Probationary Employee

**Evaluator's Comments:** (Category ratings of "Needs Improvement" or "Unsatisfactory" must be supported by a statement of the facts. Specific suggestions for improvement must be included. Comments may also include special commendations.)

**Employee Signature:** My signature below signifies that I have read and discussed this evaluation with my supervisor. It does not necessarily imply that I agree with the evaluation. A copy of this Evaluation Report will be place in my personnel file. I understand that I have the right to submit a written response to my Evaluation Report. This response is to be attached to my evaluation and placed in my personnel file.

Employee's Signature	Date	Evaluator's Signature	Date
Employee's Printed Name		Evaluator's Printed Name	
		Evaluator's Supervisor Signature	Date
		Evaluator's Supervisor Printed Name	