Dixon Public Schools

Dixon, Illinois

I. Performance Appraisal - Non-Certified

Employee's Name	Job Title	Location

A. Adaptability

Characteristics for Job Success:	Does Not Meet District Standards	Needs Improvement	Meets District Standards	Exceeds District Standards
1. Adjusts to working conditions	☐	☐	☐	☐
2. Applies self to job	☐	☐	☐	☐
3. Attitude toward job	☐	☐	☐	☐
4. Conserves materials	☐	☐	☐	☐
5. Cooperates with supervisor	☐	☐	☐	☐
6. Dependable	☐	☐	☐	☐
7. Decisive	☐	☐	☐	☐
8. Leadership	☐	☐	☐	☐
9. Observes rules	☐	☐	☐	☐
10. Uses initiative	☐	☐	☐	☐
11. Uses knowledge and skills	☐	☐	☐	☐
12. Versatile	☐	☐	☐	☐
13. Resourceful	☐	☐	☐	☐

B. Quality of Work

Characteristics for Job Success:	Does Not Meet District Standards	Needs Improvement	Meets District Standards	Exceeds District Standards
1. Accurate work	☐	☐	☐	☐
2. Loyal to school system	☐	☐	☐	☐
3. Presents ideas effectively	☐	☐	☐	☐
4. Sound judgment	☐	☐	☐	☐
5. Thorough	☐	☐	☐	☐

6. Works effectively with people	☐	☐	☐	☐

C. Productivity

Characteristics for Job Success:	Does Not Meet District Standards	Needs Improvement	Meets District Standards	Exceeds District Standards
1. Amount of acceptable work produced	☐	☐	☐	☐
2. Prompt action	☐	☐	☐	☐
3. Speed of work	☐	☐	☐	☐
4. Sets a pattern of regular attendance & punctuality	☐	☐	☐	☐

_____ Professional days

_____ Sick days

_____ Personal days

	Does Not Meet District Standards	Needs Improvement	Meets District Standards	Exceeds District Standards
II. Overall Summary of Performance:	☐	☐	☐	☐

III. Comments (suggestions for improvement, etc.):

The signature of the employee shall not indicate agreement with the written evaluation, but rather shall indicate that the conference and discussion have been held and that the employee has received a copy of the evaluation.

An employee has the right to attach a written statement to this evaluation if she/he does not agree with the contents and both the evaluation and the written statement shall be placed in the employee's personnel file.

_____ _____

Signature of Supervisor Date

_____ _____

Signature of Employee Date