

## Dixon Unified School District Classified Employees Performance Evaluation

Name \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle Initial) ID Number \_\_\_\_\_

Position \_\_\_\_\_

**Probationary Employee**  
 60 Days       120 Days

Site/ Department \_\_\_\_\_

Permanent Status  
 Recommended  Yes  No

Evaluation Period \_\_\_\_\_ to \_\_\_\_\_

**Permanent Employee**

**E - Exceeds Standards    M - Meets Standards    I - Improvement Needed    U - Unsatisfactory**

FACTOR	E	M	I	U	COMMENTS: (Additional Pages May Be Attached)
<b>1. Quality of work</b>					
a. Job Knowledge					
b. Accuracy					
c. Neatness					
d. Thoroughness					
<b>2. Quantity of Work</b>					
a. Completes work on time					
b. Volume of output					
<b>3. Work Habits</b>					
a. Attendance					
b. Punctuality/Dependability					
c. Compliance with instructions, rules and regulations					
d. Ability to work without immediate supervision					
e. Operation and care of equipment					
<b>4. Relationships With Others</b>					
a. Employees					
b. Students					
c. Public					
<b>5. Work Characteristics</b>					
a. Shows initiative and is resourceful					
b. Accepts new ideas and procedures					
c. Demonstrates adaptability and flexibility					
d. Accepts constructive criticism and suggestions related to position					
e. Accepts responsibility					
f. Organizes and uses time efficiently					
<b>6. Personal Qualities</b>					
a. Demonstrates consistent and sound judgment					
b. Demonstrates effectiveness under pressure					
c. Communicates effectively					
d. Participates in development opportunities or training					

**7. Justification for "Improvement Needed" or "Unsatisfactory" rating and recommendations for improvement of assistance to be provided.**

**8. Goals and Objectives for Next Evaluation Period**

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Name \_\_\_\_\_  
(Last) (First) (Middle Initial)

Position \_\_\_\_\_

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**SUMMARY EVALUATION: (check one)**

**EXCEEDS STANDARDS**

**MEETS STANDARDS**

**IMPROVEMENT NEEDED**

**UNSATISFACTORY**



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**EVALUATOR:**

**EMPLOYEE:**

Signature

Date

Signature

Date

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My supervisor has discussed this report with me and given me a copy of this evaluation report. I understand my signature does not necessarily indicate agreement.

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**ATTACHMENTS ADDED**  **YES**

**NO**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**Distribution: Original - Human Resources Copies – Employee, Supervisor**

**Dixon Unified School District  
Classified Employees Performance Evaluation**

**Instructions for Use of the Performance Evaluation Report Form**

The supervisor/administrator will prepare the evaluation report before meeting with the employee. At the meeting, the supervisor/administrator will review the document and discuss ratings with the employee. **All signatures shall be in ink. Changes and corrections shall be initialed by the employee and the supervisor.** The signed evaluation form will be submitted to Human Resources.

If space for comments is inadequate, similarly dated and signed attachments (also in duplicate) may be made.

Annual evaluations are to be completed by April 1.

**RATINGS**

Each rating of "Exceeds Standards", "Improvement Needed" or "Unsatisfactory" requires specific explanation under "Comments".

**GOALS AND OBJECTIVES:** Record agreed-upon or prescribed performance goals for next evaluation period.

**DEFINITIONS**

**Exceeds Standards:** Total performance is well above normal standards for the position. For a summary evaluation of "exceeds standards", the evaluation should reflect this rating in a category for each of the 5 factors where this rating is applicable and superior or excellent performance should be noted in the section for "Comments".

**Meets Standards:** Consistently competent performance meeting standards or exceeding standards in all factors for the position.

**Improvement Required:** Total performance periodically or regularly falls short of normal standards. Specific deficiencies should be noted under "Comments". This evaluation indicates the supervisor's belief that the employee can and will make the necessary improvement.

**Unsatisfactory:** Performance clearly inadequate in one or more factors as explained or documented under "Comments". Performance not acceptable for position held.

**SUMMARY EVALUATION:** Check the overall performance here, taking into account all factors and total performance over the full evaluation period.

***Important Information from Article VIII of the Collective Bargaining Agreement***

8.2 *Evaluations shall be based on standards of expected performance as outlined in job descriptions and shall be based upon formal and informal observations, conduct related to job activities, and student performance or behavior as appropriate. Evaluators will consult with building principals or others who have direct knowledge relating to performance.*

8.3 *Revisions in the District evaluation forms will be made only after consultation with employees. No evaluation of any member shall be placed in his/her personnel file without an opportunity for private discussion between the member and the evaluator. The written evaluation shall not contain negative comments based on unobserved allegations unless supported by evidence upon which reasonable persons would rely and deemed sufficiently serious to warrant inclusion in the evaluation. Specifically, if the employee and employer have had discussions pursuant to Article XIV (14), these discussions may then be included in the evaluation immediately following whatever disciplinary action has been taken. If Article XIV (14) was not utilized by the employer, the allegation to replace incident in question shall be considered resolved and shall not be addressed in the evaluation process.*

8.4 *In the event the evaluator feels that the employee's performance has been less than satisfactory, the evaluator will state in writing the specific problems and make written recommendations for improvement and provisions for assisting the employee in implementing any recommendations made.*

8.5 *Employees have the right to respond in writing to the formal evaluation, including those items the employee feels are constraints upon the employee's performance. Such response shall become a permanent attachment to the employee's personnel file. Written responses should be received within ten (10) working days or ten (10) working days after having a meeting pursuant to Article 8.9.*

8.9 *Employees who are dissatisfied with an evaluation may within ten (10) working days of receipt of the evaluation, request a meeting with their supervisor, representative and Director of Human Resources to discuss the recommendations for improvement as outlined in 8.4.*