|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name** |  | **Position Number** |  |
| **Position Title** |  |
| **Supervisor Name** |  | **Date of Review** |  |
| **Department** |  | **Period Covered** | Choose an item. |

Performance Evaluation is required by Great Falls College policy and is conducted on an annual basis. The process is designed to bring staff and supervisors together in reviewing each employee’s input into departmental and institutional goals and objectives.  This should be a collaborative experience between the supervisor and employee, affording an opportunity to celebrate achievement and to promote professional development.

**Summary Evaluation**

Consider the employee’s demonstrated performance in each of the criteria on the evaluation form and select the description which most appropriately summarizes this performance evaluation as a whole. Ratings must include supporting evidence justifying each rating. Please consult with human resources before giving a rating of “unacceptable performance.”

**Employee:** Please check one “**E**” box in each area to reflect your performance.

**Supervisor:** Please check one “**S**” box in each area to reflect employee performance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Unacceptable Performance** **E S**[ ] [ ] Performance does not meet expectations and must be improved. | **BelowExpectations** **E S**[ ] [ ] Certain aspects of the performance do not meet expectations and could be improved. | **Acceptable Performance** **E S**[ ] [ ] Meets expectations of the role and is a valued contributor to the success of the department’s mission. | **StrongPerformance** **E S**[ ] [ ] Performance is strong and contributes significantly to achieving the department’s mission. | **Exemplary Performance** **E S**[ ] [ ] Unequivocally superior performance. |

**Note:**  By signing this form, the employee acknowledges only that this evaluation was discussed and a copy has been received by the employee but does not necessarily indicate his/her agreement with the contents.

Employee’s signature Date

Supervisor’s signature Date

Executive Council’s signature Date

After conducting the evaluation the supervisor should upload the completed document named ““EMPLOYEE LAST NAME, FIRST NAME EVAL 2025” into DocuSign and route for signatures to the employee, supervisor, your Executive Council member and copy human resources.

*Employee and Supervisor should keep a copy of all completed evaluations. Last update: March 2025*

**PERFORMANCE CRITERIA**

*Please select the statement which most appropriately describes the employee’s performance:*

1. **Job Knowledge and Skills**: application of knowledge, skills and experience in performing the required job tasks and functions.

**E: S:**

[ ]  [ ]  Has sufficient knowledge to efficiently perform all expected functions of the job without instruction or assistance.

[ ]  [ ]  Has the basic knowledge and skills to carry out the responsibilities of the job with only general supervision

[ ]  [ ]  Lacks basic skills; needs instruction and guidance

[ ]  [ ]  Other: Brief description

1. **Quality of Work**: accuracy, attention to detail, neatness and effective completion of assignments or tasks.

 **E: S:**

[ ]  [ ]  Consistently achieves excellent quality; attentive to detail; achieves desired results

[ ]  [ ]  Work is usually thorough and meets departmental and customer standards

[ ]  [ ]  Meets minimum department and customer standards

[ ]  [ ]  Work is often inaccurate or incomplete and requires checking

[ ]  [ ]  Other: Brief description

1. **Resourcefulness**: efficiency, timeliness and consistency of work production; effectiveness in prioritizing work.

**E: S:**

[ ]  [ ]  Completes more work than expected; work is accurate and appropriate; seeks additional work when other responsibilities have been properly met.

[ ]  [ ]  Completes all assigned work; sets priorities effectively

[ ]  [ ]  Meets department and customer timeliness standards

[ ]  [ ]  Works more slowly than required; assistance is necessary to complete tasks

[ ]  [ ]  Other: Brief description

1. **Communication**: written, personal and oral communication skills (customer services techniques and skills); ability to collaborate and favorably represent the department.

**E: S:**

[ ]  [ ]  Possesses strong and effective communication skills; exhibits professionalism in carrying out responsibilities

[ ]  [ ]  Has the basic required skills and communicates effectively

[ ]  [ ]  Lacks the basic communications skills required; needs instruction and guidance to be effective

[ ]  [ ]  Other: Brief description

1. **Working Relationships**: provides quality service to a diverse group of individuals. Treats all people with respect and civility. Offers assistance proactively and ensures timely and complete responses.

**E: S:**

[ ]  [ ]  Consistently contributes to meeting required objectives by positively promoting cooperation, productivity, and teamwork

[ ]  [ ]  Works effectively and productively as a team member

[ ]  [ ]  Prefers to work independently

[ ]  [ ]  Reluctantly assists others; has difficulty providing the required level of cooperation needed to achieve teamwork

[ ]  [ ]  Other: Brief description

1. **Reliability**: degree of supervision needed to carry out tasks to completion and to meet objectives; willingness to accept personal responsibility for their actions.

**E: S:**

[ ]  [ ]  Extremely dependable; anticipates needs and follows through promptly with a sound course of action

[ ]  [ ]  Needs minimum guidance in the development of projects and the application of resources

[ ]  [ ]  Completes set tasks and objectives

[ ]  [ ]  Frequently does not follow instructions; requires supervision to complete assignments

[ ]  [ ]  Other: Brief description

1. **Judgment**: ability to make sound and sensible decisions leading to effective solutions.

**E: S:**

[ ]  [ ]  Consistently demonstrates good judgment in analyzing and handling problems; exhibits good judgment in stressful situations

[ ]  [ ]  Generally makes effective and sound decisions; judgments usually result in problem resolution

[ ]  [ ]  Lacks basic decision-making skills; problems typically remain unresolved

[ ]  [ ]  Other: Brief description

**SUPPLEMENTARY CRITERIA**

*Please check all that apply:*

1. **Expertise**: demonstrates excellence in the requisite skills for the job; takes initiative in broadening own knowledge and improves skills through professional development.

**E: S:**

[ ]  [ ]  Demonstrates an interest in learning; keeps current in field

[ ]  [ ]  Produces high quality results; learns from mistakes

[ ]  [ ]  Takes initiative to improve skills and proficiency

[ ]  [ ]  Shares expertise with others

[ ]  [ ]  Other: Brief description

1. **Ambassadorship**: reliably represents the department in all situations; consistently and positively promotes Great Falls College’s mission and achievements, on and off campus.

**E: S:**

[ ]  [ ]  Demonstrates excellence in modeling desired behaviors

[ ]  [ ]  Serves as a catalyst for change through positive attitudes

[ ]  [ ]  Is dedicated to the departmental/institutional mission

[ ]  [ ]  Positively represents the college

[ ]  [ ]  Other: Brief description

1. **Compliance**: demonstrates a commitment to complying with applicable policies and regulations in the course of completing job expectations.

**E: S:**

[ ]  [ ]  Is knowledgeable of and compliant with policies and regulations relevant to job duties and

[ ]  [ ]  Is knowledgeable and compliant with policies and regulations relevant to being a member of the

 Great Falls College community.

[ ]  [ ]  Is diligent about reporting concerns

[ ]  [ ]  Is committed to safety and creating a safe environment for self and others

[ ]  [ ]  Completes required trainings by the required deadline(s).

[ ]  [ ]  Seeks out and completes optional training to increase knowledge about safety and compliance.

[ ]  [ ]  Other: Brief description

1. **Supervision of Others**: effectively and appropriately exercises responsibility and authority.

*If the employee is* ***not*** *required to supervise others, please check \*not applicable\*.*

**E: S:**

[ ]  [ ]  Not applicable

[ ]  [ ]  Demonstrates proper leadership

[ ]  [ ]  Accepts responsibility and is accountable for own actions

[ ]  [ ]  Maintains a positive attitude, even during challenging and difficult situations

[ ]  [ ]  Ensures employees are given relevant tools, training, and support; develops employees’ skills and abilities and motivates them to accomplish objectives

[ ]  [ ]  Uses appropriate techniques to ensure all employees function well as a team

[ ]  [ ]  Appropriately delegates responsibility and authority

[ ]  [ ]  Proficiently monitors the work of others; clearly communicates departmental expectation; consistently conducts effective and well received performance evaluations

[ ]  [ ]  Successfully motivates employees to accomplish objectives and meet performance standards

[ ]  [ ]  Other: Brief description

**Goals & Objectives**

If goals were established during the last review, outline if/how they were met. Then, indicate goals to be accomplished within the next 6 to 12 months. These goals should be compatible with departmental and college objectives and should be mutually developed by both supervisor and employee. If performance level needs to be improved, specific development objectives should be established. Consideration should be given to the action’s management can take to support the employee’s effort to increase performance.

**E**: Outline accomplishments and future goals.

**S**: Outline accomplishments and future goals.

**Training (Optional)**:

Human Resources, supported by campus leadership, encourages training for employees. There are no college requirements for training. This is intended as an *informational section only*. The purpose of this section is to:

* encourage a discussion about training for the next year
* provide a place on the form to document training needs from both the supervisor and employee perspective
* provide a place to allow employees who have attended training to list any professional development or job-related training attended during the review period

**Please list any training or professional development attended during the review period**:

**E**: Brief description

**S**: Brief description

**Please list any training or professional development that might be helpful during the coming year**:

**E**: Brief description

**S**: Brief description

**SUPERVISOR COMMENTS**

Referencing the categories above, please expand upon ratings.

|  |
| --- |
| **Strengths**: highlight specific performance criteria (observable skills and behaviors) that contributed to the employee’s accomplishments and performance.*Enter text here***Areas of Improvement/Development**: this relates to improvement needed in current job performance as well as development needed to prepare for future assignments.*Enter text here***Overall Comments**: consider overall performance in summarizing the employee’s contributions.*Enter text here* |

**EMPLOYEE COMMENTS**

|  |
| --- |
| *Enter text here* |