

# SHORELINE SCHOOL DISTRICT CLASSIFIED PERSONNEL PERFORMANCE EVALUATION FORM



**NAME:** \_\_\_\_\_

LAST

FIRST

MIDDLE

PERIOD OF REPORT

EVALUATION DATE

SCHOOL OR DEPARTMENT

JOB TITLE

**EVALUATION TYPE:**    **ANNUAL:** \_\_\_\_\_    **PROBATIONARY:** \_\_\_\_\_    **OTHER:** \_\_\_\_\_

	Meets/Exceeds Expectations	Needs Improvement	Unsatisfactory
<b>1. INSTRUCTIONAL SKILL</b> Developing appropriate group and individual activities to meet instructional objectives using a variety of techniques.			
<b>2. INSTRUCTING STUDENTS</b> Facilitating, encouraging, and expecting all students to succeed while recognizing the unique characteristics of each student.			
<b>3. BEHAVIOR MANAGEMENT SKILLS</b> Being attentive to conditions that affect the health and safety of students. Developing classroom procedures that clearly define expectations for student behavior. Dealing with students fairly and consistently, focusing on student behavior rather than personality.			
<b>4. WORK ETHIC AND ACCOUNTABILITY</b> Attending staff meetings and willingness to participate in professional development options. Maintaining good attendance and punctuality.			
<b>5. PROFESSIONAL DEVELOPMENT AND PLANNING</b> Demonstrating willingness to learn and explore new curriculum and instructional techniques.			
<b>6. PARENT/STAFF COMMUNICATION AND RELATIONSHIPS</b> Interacting with colleagues, administrators, and parents in a respectful manner.			
<b>7. LEAD/ASSISTANT JOB PERFORMANCE</b> <u>Lead</u> *Completes and implements lesson/activity plans. *Demonstrates leadership qualities with team. *Implements and upholds program policies and procedures. *Uses good judgment at all times. *Considers safety of children at all times. *Shows awareness of what is occurring in classroom. *Provides guidance and direction to assistants. *Knows and uses Program Emergency Preparedness System.  <u>Assistant</u> *Is willing to follow directions of lead. *Takes initiative to get things done. *Is prompt, responsible and reliable. *Demonstrates ability to take leadership role when necessary. *Knows and uses Program Emergency Preparedness System. *Uses good judgment at all times. *Considers safety of children at all times. *Shows awareness of what is occurring in classroom.			

**Evaluator Comments:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Employee comments will be written as an attachment and returned within 30 calendar days from the date of evaluation discussion. The signature below does not necessarily imply that the employee agrees with the preceding, but only that he/she has seen and/or discussed it with the evaluator and/or supervisor.

**Evaluation Prepared by:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_