EASTSIDE UNION SCHOOL DISTRICT
Probationary Employee

Employee Name: _____ **Due Date:** _____

Job Title: _____ **Site:** _____

NINE MONTH EVALUATION

	Excellent	Satisfactory	Needs Improvement	Unsatisfactory
1. Attendance				
2. Punctuality				
3. Dresses Appropriately				
4. Cooperation with Co-Workers				
5. Cooperation with Administration and Faculty				
6. Observes Health-Safety Codes				
7. Performs Assigned Duties				
8. Conscientious Toward Performance of Duties				
9. Quality of Work: Accuracy/Neatness Completeness/Thoroughness				
10. Quantity of Work				
11. Knowledge of Methods-Materials Used				
12. Adaptable in Performance of Duties				
13. Dependability				
14. Attitude: Interest in Work, Willingness to Meet Requirements and Maintain Ethical Conduct				
15. Judgement: Sound Decisions				
16. Performs with Minimal Supervision				
17. Executes Care in Use of Equipment and Supplies				

Comments:

Employee's Signature* Date

Evaluator's Signature* Date

**Signature indicates evaluation has been read.*

Reviewed By