

**Springdale Parks and Recreation Department
Employee Performance Review**

Employee: _____ Position: _____

Interviewer: _____

Anniversary Date: _____ Interview Date: _____

- Outstanding** Performance is exceptional in all areas and is recognizable as being far superior.
- Very Good** Results clearly exceed most position requirements. Performance is of high quality and is achieved on a consistent basis.
- Good** Competent and dependable level of performance. Meets the standards of the job.
- Improvement Needed** Performance is deficient in certain areas. Development is necessary.
- Unsatisfactory** Results are generally unacceptable and require immediate improvement.
- Not Rated** Not applicable

1. **Quality of Work** *The accuracy, thoroughness and acceptability of work performed.*

Rating: _____

2. **Productivity** *The quantity and efficiency of work.*

Rating: _____

3. **Job Knowledge** *The practical/technical skills and information used on the job.*

Rating: _____

4. **Reliability** *The extent to which an employee can be trusted regarding task completion and follow up.*

Rating: _____

5. **Judgment** *The quality of decision making, planning and logical thought.*

Rating: _____

6. **Availability** *The overall attendance record, punctuality and compliance with prescribed work breaks.*

Rating: _____

7. **Adaptability** *The ability to adjust to change, new duties and willingness to learn new tasks.*

Rating: _____

8. **Initiative** *The level of motivation and interest in work and suggestions for improvement.*

Rating: _____

9. **Professionalism** *The quality of communication, appearance, and courtesy.*

Rating: _____

10. **Safety** *The extent to which an employee complies with standards and reports problems.*

Rating: _____

11. **Cooperation** *The ability to work productively with others and maintain respectful and courteous relations.*

Rating: _____

12. **Independence** *The extent of work performed with little or no supervision.*

Rating: _____

Summary of Overall Performance

Signatures

This report is based on my observation and knowledge of both the employee and the job.

_____ date _____
Supervisor

_____ date _____
Interviewer

My Signature indicates that I have reviewed this appraisal. It does not mean I agree with the results.

_____ date _____
Employee