

WINGATE UNIVERSITY
Non-Academic Personnel Evaluation Form

Employee Name: _____

Date Due: _____

Title: _____

Years at Wingate: _____

Instruction to Supervisor:

This evaluation should be written in your own hand, completed without consultation with anyone else, sealed, and delivered to your immediate supervisor in a confidential envelope. Extra caution should be given to be certain that this is a balanced judgment and that factors related to race, sex, or religion do not enter into this evaluation.

For each applicable performance area, mark the box that most closely reflects the employee's performance.

1 = unacceptable; 2 = needs improvement; 3 = satisfactory; 4 = above average; 5 = outstanding

PERFORMANCE AREA	1	2	3	4	5	PERFORMANCE AREA	1	2	3	4	5
Ability to make job-related decisions						Effective under stress					
Accepts change						Initiative					
Accepts direction						Knowledge of work					
Accepts responsibility						Leadership					
Attendance/Dependability						Operation and care of equipment					
Attitude						Planning and organizing					
Compliance with University Policies						Quality of work					
Cooperation						Quantity of acceptable work					
Cost consciousness						Safety Practices					
Courtesy and responsiveness to people						SUPERVISOR'S OVERALL APPRAISAL					

JOB STRENGTHS AND SUPERIOR PERFORMANCE INCIDENTS:

AREAS FOR IMPROVEMENT:

SPECIFIC OBJECTIVES TO BE UNDERTAKEN PRIOR TO NEXT REVIEW FOR IMPROVED WORK PERFORMANCE:

Use a separate sheet, if necessary, for additional comments by supervisor or employee. Please note on form if separate sheet is used: _____

Rating Supervisor's Signature: _____

Date: _____

Vice-President's Signature: _____

Date: _____

Employee's Signature: _____

Date: _____