



**Waseca Public Schools
Independent School Dist. 829
Summative Evaluation Form for Non-Licensed Employees**

Name:	Observation/Review Date:
Evaluator:	School:
Setting Observed:	<input type="checkbox"/> Probationary <input type="checkbox"/> Non-Probationary

N/A= Not Assessed U= Unsatisfactory B= Basic P= Proficient D= Distinguished

Year Proficiency (P)
Expected
1 2 3

Domain 1: Professional Behavior

Performance Level

- | | |
|---|------------------------|
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Attendance: Faithfulness in coming to work on time, as scheduled. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Promoting a Professional Attitude & Culture: The way in which one expresses themselves & demonstrates professional behavior at the workplace. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Communication: Written, verbal, non-verbal, & listening skills. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Adaptability & Flexibility: The ability to adjust to changing situations and maintain professional demeanor under pressure. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Prioritization, Organization, & Time Management: The productive use of time during the work day, the ability to prioritize tasks and work efficiently. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Professional Appearance & Workspace: Personal cleanliness, appropriate dress, and a safe, orderly work environment. | NA U B P D |

Comments:

Domain 2: Job Skills

Performance Level

- | | |
|--|------------------------|
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Basic Technology Skills: Word processing, spreadsheet, email, and voicemail utilization. | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Job Specific Technology Skills: Utilization of the specific technology Applications that are necessary for specific positions. (e.g. District Student Information System, the Finance System, etc.) | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Job Skills: (Supervisor should list skills which are expected for this Particular position and comment on the employee's skill level.) | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Skill: _____ | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Skill: _____ | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Skill: _____ | NA U B P D |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Skill: _____ | NA U B P D |

Skill: _____ NA U B P D
 Skill: _____ NA U B P D

Comments:

Summary

Major Areas of Strength:

Possible Areas for Growth:

These can be strengthened by doing the following:

- Recommend Continued Employment
- Recommend Continued Employment with Support
- Recommend Non-Renewal due to Performance

Supervisor Signature: _____ Date: _____

**My signature below acknowledges that I have received a copy of my evaluation dated _____.
I was also provided the opportunity to view and discuss this evaluation.
Initials and date indicate that professional has received but does not agree with evaluation.
Signature and date indicate that professional has received and agrees with evaluation.**

Employee Signature: _____ Date: _____