PERFORMANCE APPRAISAL FOR JOB ORDER

**DRIVERS**

For \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
(Period)

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

DEPLOYMENT/COLLEGE ASSIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IMMEDIATE SUPERVISOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instruction: Please put a check (🗸) in the box that corresponds to your rating each item.

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| --- | --- | --- | --- | --- | --- |
| Items on which to be rated | Unsatisfactory1 | Fair2 | Satisfactory3 | Very Satisfactory4 | Outstanding5 |
| 1 | Expertise on the assigned job ; knowledge in troubleshooting |  |  |  |  |  |
| 2 | Completes assigned work efficiently and in an organized manner within an established time frame |  |  |  |  |  |
| 3 | Follows district policies, procedures and observes traffic rules and regulation |  |  |  |  |  |
| 4 | Carefulness in driving ; keen and alert |  |  |  |  |  |
| 5 | Daily completes vehicle safety maintenance |  |  |  |  |  |
| 6 | Shows due consideration to passengers |  |  |  |  |  |
| 7 | Notifies supervisor of any unsafe conditions |  |  |  |  |  |
| 8 | Ability to care for university equipment maintenance or properties |  |  |  |  |  |
| 9 | Neatness and personal hygiene; Wearing of proper foot wear & uniform |  |  |  |  |  |
| 10 | Punctuality & regularity of attendance |  |  |  |  |  |
| 11 | Establishes positive relation and works well with supervisors, peers and subordinates |  |  |  |  |  |
| 12 | Courtesy; Salute superiors and University officials |  |  |  |  |  |
| 13 | Communicates effectively |  |  |  |  |  |
| 14 | Shows work ethic, integrity and sensitivity to confidentiality |  |  |  |  |  |
| 15 | Physically fit and meets energy job requirements |  |  |  |  |  |
| 16 | OTHERS (please identify other traits observed if any): |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |
| **FINAL RATING:** |  | **ADJECTIVAL RATING:** |  |

NARRATIVE REPORT (By Rating Official)

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 I certify that the above performance evaluation is based on the actual accomplishment of the ratee and that I have discussed my evaluation with him/her.

Recommendation: ( ) to be retained ( ) to be replaced

|  |
| --- |
|  |
| Signature of Rater/Date |
|  |
| Signature of Ratee/Date |