

UNION-ENDICOTT CENTRAL SCHOOL DISTRICT
Personnel Office
Annual Evaluation Form for Maintenance Worker's Association

EMPLOYEE _____ **DATE** _____

MAJOR RESPONSIBILITIES	PERFORMANCE EXCEEDS STATED CRITERIA	PERFORMANCE AS STATED IN CRITERIA	NEEDS IMPROVEMENT IN SPECIFIC DUTIES	PERFORMANCE DOES NOT MEET CRITERIA

EVALUATION SUMMARY:

SUGGESTED IMPROVEMENTS:

I have reviewed my evaluation with my evaluator. My signature means that I have discussed my evaluation. It does not necessarily imply that I agree.

Any comments I desire to make regarding this evaluation will be placed in writing and attached.

EVALUATEE _____ **DATE** _____

EVALUATED BY _____ **DATE** _____
 _____ **DATE** _____

REVIEWED BY

GroupWise Folder/Administrator Documents/Evaulation Form Maintenance 6/08
