

**CITY OF PORT ARTHUR**  
**Employee Performance Evaluation**  
**For Technical and Professional Personnel**

Name of Employee \_\_\_\_\_  
 Department \_\_\_\_\_

Position \_\_\_\_\_  
 Division \_\_\_\_\_

Rating for \_\_\_\_\_ month period ending \_\_\_\_\_

Point Value	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
EXCEPTIONAL	10																								
GOOD	8																								
ABOVE AVERAGE	6																								
AVERAGE	4																								
MARGINAL	2																								
INADEQUATE	0																								
UNACCEPTABLE	-2																								

**RATING GUIDELINES**

**EXCEPTIONAL** - This rating should be given only to an employee who is outstanding in the area evaluated. To warrant this rating, the employee should far surpass the assigned duties or expected performance. This rating is normally warranted by only a very select group of employees who make an outstanding contribution to their job. This rating is to be justified in writing.

**GOOD** - This rating should be given when an employee's performance is better than expected of a fully competent employee, and exceeds the job requirements.

**ABOVE AVERAGE** - This rating is to be used where the employee's performance slightly exceeds the level normally expected for properly assigned and trained employees.

**AVERAGE** - This is the appropriate rating for competent employees whose performance level is that which is normally expected for properly assigned and trained employees. It is assumed that the employee rated at this level has met the job requirements.

**MARGINAL** - This rating indicates that the performance level is slightly below the established standard for competency in the work, but acceptable. Some improvement is needed when this rating is given. Supervisors should provide employees with specific suggestions as to how performance could be improved when this rating is given.

**INADEQUATE** - Ratings at this level mean that performance has fallen short of the job requirements. Efforts should be made to raise the performance level, through increased training, counseling, or transfer. Reasons for this rating should be discussed thoroughly with the employee. This rating is to be explained in writing.

**UNACCEPTABLE** - This rating means that the employee is considered a liability rather than an asset in this area. This level of performance requires immediate and identifiable improvement. This rating must be supported in writing.

**NOTE:** Should any rating category shown not be applicable to the employee being rated, the average score for that category should be given, or another category that is applicable may be substituted by the supervisor and whatever rating score that is appropriate for the substituted category may be given.

I certify that all ratings have been made in conformance with the guidelines listed above.

Initials of Rating Official \_\_\_\_\_

**CALCULATION OF RATING**

Total Exceptional	Ratings	0	times	10	points =	0	Total Inadequate	Ratings	0	times	0	points =	0
Total Good	Ratings	0	times	8	points =	0	Total Unacceptable	Ratings	0	times	-2	points =	0
Total Above Average	Ratings	0	times	6	points =	0	<b>TOTAL</b>						
Total Average	Ratings	0	times	4	points =	0							
Total Marginal	Ratings	0	times	2	points =	0							

Rating Official:

in my judgment, the over-all performance during the period in review has:

Exceeded in all phases of job requirements  Exceeded job requirements  Met job requirements   
 Fallen short of job requirements  Failed to meet job requirements

Rating Official's comments: Describe employee's strengths and weaknesses and give examples. Ratings of Exceptional, Inadequate and unacceptable must be explained in full.

I have discussed with this employee all ratings of Inadequate or Unacceptable.

Rating Official's signature \_\_\_\_\_

Date \_\_\_\_\_

Reviewing Official's comments:

Reviewing Official's signature \_\_\_\_\_

Date \_\_\_\_\_

Department Head's Comments: I hereby approve this evaluation and concur with the evaluation and personnel action recommended, if any, by the rating official and/or reviewing official, except as noted herein:

Department Head's signature \_\_\_\_\_

Date \_\_\_\_\_

I have received a copy of this report:

Employee's signature \_\_\_\_\_

Date \_\_\_\_\_

**ROUTING: Original to Human Resources Dept., first copy retained by department and second copy furnished to employee.**