



FRONTIER SCHOOL DIVISION
ANNUAL MERIT INCREASE EVALUATION FORM

Frontier School Division believes that one factor in providing a high quality educational environment for students is the ongoing supervision and evaluation of support staff.

Employee Name: _____

Location: _____

Supervisor: _____

Review Period Start Date: _____ Review Period End Date: _____

PERFORMANCE RATINGS	Meets Expectations	Developing	Unsatisfactory Performance	Not Applicable
Job Knowledge and Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be consulted by others on all aspects of the job. Uses, shares and applies expertise to make effective decisions.	Comments:			
Attitude, Cooperation and Compatibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in work activities and exchanges ideas productively with co-workers. Demonstrates positive relationships with students, other employees and the public. Willingly accepts constructive criticism, direction and/or supervision.	Comments:			
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicates clearly, accurately and thoroughly in oral and written formats to convey information and ideas to others. Utilizes applicable communication protocols.	Comments:			
Judgment, Decision Making and Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzes problems skillfully, uses logic and sound judgment to identify solutions, develops alternative solutions and recommendations, selects appropriate course of action, and exhibits discretion in matters requiring confidentiality.	Comments:			
Attendance and Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attends work regularly, arrives at and departs from work as scheduled and provides adequate notice of inability to attend work.	Comments:			
Confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintains and respects confidentiality of information. Utilizes appropriate practices to maintain confidentiality.	Comments:			
Flexibility and Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively manages work interruptions and is flexible in meeting the changing needs of the workplace.	Comments:			
Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establishes and maintains workable relationships with others, solicits and considers the opinions of others, is helpful and courteous and presents a positive image to students, parents/guardians and community members.	Comments:			

PERFORMANCE RATINGS <i>(continued)</i>	Meets Expectations	Developing	Unsatisfactory Performance	Not Applicable
Independence and Initiative Appropriately and effectively plans, prioritizes and performs work independently and assists others as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work Completes assigned duties in a reliable manner with precision and provides a consistently high standard of work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisory Skills <i>(N/A unless directing the work of others)</i> Effectively plans and schedules work, communicates expectations, and addresses performance concerns in an appropriate fashion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS <i>(attach additional page(s) if required)</i>

DEVELOPMENT PLANS DURING THE NEXT REVIEW PERIOD <i>(attach additional page(s) if required)</i>

RECOMMENDATION

Based on this individual's performance, they are eligible to receive a merit increase:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Supervisor's Signature:	Date:	

I have reviewed this evaluation and support the supervisor's recommendation:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Superintendent's Signature:	Date:	

EMPLOYEE'S COMMENTS <i>(attach additional page(s) if required)</i>

Your signature confirms that you have read this evaluation and reviewed it with your supervisor, but does not necessarily mean you agree with this evaluation.			
Employee's Signature:	Date:		