## Employee Performance Review MIDYEAR TEMPORARY OR PART TIME EMPLOYEE

| Employee Name |  |
| ---: | ---: |
| Evaluator's Name |  |
| Date Midyear is Due |  |
| Date Discussed |  |


| Organizational Knowledge \& Judgment: Demonstrates knowledge of the standard operating procedures, processes and equipment necessary for this role. Recognizes and resolves potential issues using sound judgment to determine the right course of action. Involves others in the decision-making process as needed. | Select One - |
| :---: | :---: |
| Comments: |  |
|  |  |
| Communication: Has effective and appropriate verbal and written communication and listening skills. Remains accessible and available to other employees as needed. | Select One - |
| Comments: |  |
| Skillset: Possess all the knowledge and expertise to effectively perform the assigned duties. Demonstrates interest in completing assigned training to obtain new skills and/or proactively masters new competencies independently. | Select One - |
| Comments: |  |
| Quality of Work: Demonstrates high quality of work in general; ensures thoroughness, accuracy, completeness of work. | Select One - |
| Comments: |  |
| Initiative: Demonstrates resourcefulness, versatility; and teamwork qualities necessary to conceptualize and carry out additional duties. | Select One - |
| Comments: |  |

## Progress on Current Goals or Creation of New Goals:

Employee to complete

Employee Acknowledgement: I have read this evaluation and have been given the opportunity to discuss the contents with my supervisor. I understand that I may make comments in the space provided or attach them to this document. I understand that my position is contingent upon Region 9 receipt of sufficient State/Federal/Other funds.

Signature of Employee
Date

Manager Acknowledgement: I have reviewed and discussed this evaluation with the employee.

