

Ocean County College, Toms River, NJ

PERSONNEL  
ADMINISTRATIVE  
All Administrators, Unclassified, Part-Time  
Professionals, Managerial-Technical,  
Confidential M/T & Clerical & Supportive Staff  
Employees  
Performance Evaluations \_\_\_\_\_ #3105

## POLICY

The performance of all employees cited above shall be evaluated annually and at such additional times as determined by the appropriate supervisor. Performance evaluations shall be used for employment-related decisions.

Wherein the specifics of this policy are at variance with the terms and conditions of a collective bargaining agreement, the terms and conditions of the collective bargaining agreement shall take precedence.

ADOPTED: July 24, 1972  
Revised: March 25, 1991  
Revised: September 28, 1998

## PROCEDURE

### **Purpose:**

The primary purpose of evaluation is to improve the performance of each employee. Performance evaluation should also improve communication between supervisors and employees. Evaluations also provide a documented history of an individual's performance, which forms the basis for many employment-related decisions.

### **Process:**

Performance evaluation is an interactive process that never stops. It occurs daily through direct observation, and indirectly through the assessment of completed work. Ideally, this continual process should involve ongoing communication between each supervisor and each employee, pertaining to the quality, efficiency, and timeliness of the employee's performance and conduct.

### **Confidentiality:**

All performance evaluation forms are to be considered confidential. Supervisors shall transmit such material confidentially and take such action as is necessary to confidentially secure any copies of performance evaluation kept in his/her department.

### **Frequency:**

Performance shall be summarized annually on the appropriate formal evaluation forms. However, formal evaluation forms may be completed as often as it is deemed appropriate by a supervisor in order to improve the performance of an employee. Probation evaluation shall be completed for each new Supportive Staff employee, upon completion of the first ninety (90) days of employment at the college.

### **Evaluation Versus Discipline:**

Performance evaluation is not to be considered discipline. However, the record of evaluation may eventually lead to discipline if the work/conduct of the employee does not improve to a level of acceptable performance.

### **Distribution of Evaluation Forms:**

On or about June 1st of each year, the Office of Human Resources shall distribute appropriate evaluation forms to each supervisor. The evaluation forms are designed to cover the time frame of one year (July 1<sup>st</sup> through June 30<sup>th</sup>). Distribution of evaluation forms may differ for employees/supervisors who do not work the regular budget year cycle. The Office of Human Resources shall distribute Probation Evaluation Forms for new Supportive Staff employees as necessary.

### **Evaluation Conference:**

Supervisors shall meet individually with each employee under his/her supervision for the purpose of discussing the completed evaluation. Supervisors shall provide a completed copy of the evaluation form to the employee at such conference(s). Supervisors should be prepared to explain the reasons for his/her evaluation assessments. Supervisors should use this opportunity to establish recommendations for improvement for each employee for the subsequent evaluation cycle. The employee shall be provided an opportunity to write comments on the evaluation form. At the conclusion of the evaluation conference, the completed evaluation form and attachments shall be signed and dated by the supervisor and the employee.

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Staff Employees Evaluation #3105

**Signatures:**

Signatures on evaluation forms only mean that the parties have seen the completed form and have had an opportunity to meet and discuss the completed form. Signing an evaluation form does not mean agreement or approval of its contents. In the event an employee refuses to sign, the supervisor shall note on the form "Employee refuses to sign." The evaluation form shall then be forwarded in accordance with the procedures set forth below.

**Recommendation for Improvement:**

Supervisors should write recommendations for improvement for all areas of performance, which are not satisfactory or acceptable. Such recommendations shall be specific. Recommendation shall be limited to what can be reasonably expected of an employee to accomplish in the subsequent evaluation cycle. Each supervisor should understand that it is his/her responsibility to document the resources and/or training provided to the employee to accomplish the recommendation(s) during the subsequent evaluation cycle. The subsequent evaluation form should reflect the outcome of the employee's efforts to achieve what has been recommended and the supervisor's efforts to help the employee succeed.

**Evaluation Disputes:**

In the event an employee disputes the comments, assessments, or recommendations of the supervisor, the employee may write a rebuttal to the evaluation. This evaluation rebuttal shall be signed and dated by the employee and transmitted to the Vice President of Human Resources for attachment to the formal evaluation form. Evaluation rebuttals shall be transmitted not later than fifteen (15) days following receipt to the evaluation by the employee. Employees should understand that such rebuttal statement will be copied to his/her supervisor.

**Deadlines for Transmission of Completed Forms:**

Supervisors shall confidentially transmit the original copy of all completed performance evaluation forms to his/her area Vice President not later than July 15<sup>th</sup> of each year. Supervisors working in the President's area shall confidentially transmit all completed performance evaluation to the President not later than July 15<sup>th</sup> of each year. Area Vice Presidents shall read and initial each evaluation for his/her area. Area Vice Presidents shall communicate with supervisors as may be deemed appropriate regarding completed evaluations. Area Vice Presidents shall confidentially transmit all evaluations for his/her area to the president not later than August 1<sup>st</sup> of each year. The President shall read and initial all evaluations and shall communicate with area Vice Presidents as deemed appropriate. The President shall confidentially transmit all evaluation forms to the Vice President of Human Resources not later than August 30<sup>th</sup> of each year. The Vice President of Human Resources shall be responsible for having the original copy of each evaluation form filed in the appropriate personnel file.

**Disposition of Evaluation Material:**

Performance Evaluation Forms and all attachments shall not be removed from an individual's Personnel file

Ocean County College, Toms River, NJ

Personnel

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All Administrators, Unclassified, Part-Time

Professionals, Managerial/Technical,

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Staff Employees Evaluation #3105

**Evaluation Instruments:**

Copies of the current evaluation instruments used for various employee classifications are attached hereto. Changes to the evaluation instruments shall be accomplished through a committee process, wherein representatives of the effected classification have an opportunity for involvement. All changes to evaluation instruments shall be subject to approval the President and the Board of Trustees prior to utilization.

Adopted: July 4, 1972

Revised: September 30, 1998

Revised: April 25, 2000

Revised: November 21, 2000



Identification Label or:

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Evaluation Period From: \_\_\_\_\_ to \_\_\_\_\_

**Purpose:** The purpose of this evaluation is (a) to make an evaluative inventory, pinpointing strengths and weaknesses, and (b) to outline a practical improvement program, if indicated. Evaluation shall be done annually and at such other times deemed necessary by the supervisor. This evaluation will provide a history of job effectiveness, development, and progress.

**Evaluation Criteria:** Indicate a rating of the employee's job performance from 1 to 5 for each category. For each category place a number in the box which best describes the employee's job performance. The rating criteria are defined as follows:

- 5 = Outstanding performance
- 4 = Very effective performance
- 3 = Competent performance
- 2 = Minor improvement needed
- 1 = Major improvement needed
- n/a = not applicable

**Position Management -** The employee:

- 1. understands his/her assignments in relation to others in the college
- 2. manages time effectively
- 3. establishes job-related objectives for self
- 4. analyzes problems, evaluates facts and makes objective decisions

**Office Management -** The employee:

- 1. uses the abilities of the office staff effectively
- 2. delegates responsibility, appropriately promoting professional growth of staff
- 3. motivates staff to perform more effectively
- 4. established job-related objectives for office staff

**Technical Performance -** The employee demonstrates:

- 1. sufficient knowledge to perform job responsibilities
- 2. a desire to learn new technical skills

3. the ability to use available technology to enhance  performance
4. accomplishment of all assignments required  of this position
5. the ability to communicate clearly and concisely in oral  and written form

**Commitment to Job** - The employee demonstrates commitment to the position through:

1. attendance
2. punctuality
3. effective collaboration and cooperation with  workers

Supportive Comments:

(Add pages, if necessary)

Recommendations for Improvement: (This section must be completed for all categories rated #1 or #2)

(Add pages, if necessary)

**Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Employee Comments: (Optional)

(Add pages, if necessary)

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Note: Your signature ONLY indicates that you have read and discussed the evaluation with your supervisor.)

Copies: Original to be placed in the Employee's Personnel File  
Employee  
Supervisor



Confidential Clerical Employee Evaluation  
Form # 3105-3

Identification Label or:

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Evaluation Period From: \_\_\_\_\_ to \_\_\_\_\_

**Instructions:** Place an "X" in the appropriate space for each rating category that you think best describes how effectively the employee accomplished the function during the specified rating period. Comments are required under each rating category to support the rating given to the employee. Add more sheets, if necessary.

1. **Knowledge of Job:** Consider whether the employee has proper understanding of his/her job functions as it relates to the goals of the college.

\_\_\_\_\_ Outstanding    \_\_\_\_\_ Above Average    \_\_\_\_\_ Satisfactory    \_\_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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2. **Quality, Follow-up & Control of Work:** Consider the accuracy, reliability, and presentation quality of work.

\_\_\_\_\_ Outstanding    \_\_\_\_\_ Above Average    \_\_\_\_\_ Satisfactory    \_\_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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3. **Cooperation, Teamwork & Interpersonal relationship(s):** Consider the employee's attitude in accepting work assignments, and in working with other employees and students.

\_\_\_\_\_ Outstanding    \_\_\_\_\_ Above Average    \_\_\_\_\_ Satisfactory    \_\_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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4. **Planning and Organization:** Consider the employee's ability to establish priorities, analyze and resolve problems and in meeting objectives.

\_\_\_\_\_ Outstanding    \_\_\_\_\_ Above Average    \_\_\_\_\_ Satisfactory    \_\_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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5. **Communication:** Consider the employee's ability to clearly communicate in both oral and written form.

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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6. **Dependability:** Consider whether or not the employee can be relied upon for consistent performance of job duties, including attendance and punctuality.

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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**7. Overall Evaluation:**

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

**Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

8. **Employee Comments:** (Optional)

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(add pages, if necessary)

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Copies: Original to be placed in the Employee's Personnel File  
Employee  
Supervisor





River, NJ

Supportive Staff Performance Evaluation Form # 3105-4

Identification Label or:

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Evaluation Period From: \_\_\_\_\_ to \_\_\_\_\_

Instructions: Place an "X" in the appropriate space for each rating category that you think best describes how effectively the employee accomplished the function during the specified rating period. Comments are required under each rating category to support the rating given to the employee. Add more sheets, if necessary.

1. Knowledge of Job: Consider whether the employee has proper understanding of his/her job functions and whether or not additional instruction is needed to accomplish assigned tasks.

\_\_\_\_ Outstanding \_\_\_\_ Above Average \_\_\_\_ Satisfactory \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Quality, Follow-up & Control of Work: Consider the accuracy, reliability, and presentation quality of work.

\_\_\_\_ Outstanding \_\_\_\_ Above Average \_\_\_\_ Satisfactory \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Cooperation, Teamwork & Interpersonal relationship(s): Consider the employee's attitude in accepting instruction, work assignments, and in working with other employees and students.

\_\_\_\_ Outstanding \_\_\_\_ Above Average \_\_\_\_ Satisfactory \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Planning and Organization: Consider the employee's ability to establish priorities and meet objectives. Also, consider the employee's ability to utilize available resources to the fullest capacity.

\_\_\_\_ Outstanding \_\_\_\_ Above Average \_\_\_\_ Satisfactory \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

\_\_\_\_\_  
\_\_\_\_\_

5. **Communication:** Consider the employee's ability to clearly communicate in oral and written form.

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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6. **Dependability:** Consider whether or not the employee can be relied upon for consistent performance of job duties, including attendance, punctuality, and proper advance reporting of leave requests.

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

Comments & Suggestions for Improvement:

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7. **Overall Evaluation:**

\_\_\_\_ Outstanding    \_\_\_\_ Above Average    \_\_\_\_ Satisfactory    \_\_\_\_ Unsatisfactory

**Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

8. **Employee Comments:** (Optional)

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(add pages, if necessary)

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Note: Your signature ONLY indicates that you have read and discussed the evaluation with your supervisor.)

Copies: Original to be placed in the Employee's Personnel File  
Employee  
Supervisor