

# TEACHING ASSISTANT/ATTENDANT/MONITOR EVALUATION REPORT

 Employee: Click here to enter text. Job Title: Click here to enter text.

 Employee ID #: Click here to enter text. Location: Click here to enter text.

 Supervisor: Click here to enter text. Date of Evaluation: Click here to enter text.

 [ ]  Tenured Tenure Date: Click here to enter text.

 [ ]  Non Tenured

|  Illustrative Examples(Required if rating is below expectations or improvement needed) | Unsatisfactory | Satisfactory | Good | Excellent |  |  Illustrative Examples(Required if rating is below expectations or improvement needed) |
| --- | --- | --- | --- | --- | --- | --- |
| JOB PERFORMANCE (See Attachment) |
| Is regular in daily attendance | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Is appropriately dressed | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Shows initiative | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Is punctual in performance in job duties | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Works well with staff members | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Works well with students |[ ]  [ ]  |[ ] [ ]  Click here to enter text. |
| Is receptive to supervision |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Continues to learn and improve (in-service) | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Is knowledgeable of job expectations | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Performs instructional duties | [ ]  |[ ] [ ] [ ]  Click here to enter text. |
| Performs non-instructional duties |[ ]  [ ]  |[ ] [ ]  Click here to enter text. |
| Respects confidentiality | [ ]  |[ ] [ ] [ ]  Click here to enter text. |

List any strengths which you feel merit comment.

List any concerns which you think require attention.

What alternate suggestions have been made to the employee to help him/her alleviate these concerns?

List any deficiencies which you think require improvement.

What alternate suggestions have been made to the employee to improve his/her performance?

**(FOR PROBATIONARY EMPLOYEES ONLY)**

WOULD YOU RECOMMEND THIS PERSON FOR CONTINUED EMPLOYMENT OR TENURE? [ ] YES [ ]  NO

**Signature of Employee:**   **Date:**

**Signature of Supervisor:**  **Date:**

 **Copies to:**

[ ]  Supervisor [ ]  Principal/Administrator

[ ]  Employee [ ]  Personnel File