CITY OF GAUTIER
MEMORANDUM

To: Samantha Abell, City Manager

From: Jason Pugh, Human Resources Director

Date: 06/09/15

Subject: Approval of New Performance Evaluation Form

REQUEST
The Human Resources Dept. requests council approval of the attached new performance appraisal form to conduct annual employee evaluations.

BACKGROUND:
Performance Appraisals are a valuable tool for managing employee performance and are required by city policy and civil service regulations. Traditionally employees have been evaluated annually in ten areas of job performance and scored on a scale of 1 through 5 per category.

DISCUSSION:
The Human Resources Department has researched performance appraisals and developed the attached form to be used in place of all other performance appraisal/evaluation forms currently in use. The attached form will allow employees to be graded on the same ten (10) categories as before based on a 100 point scoring system. This change will allow for better separation among employees and will help identify top performers. All supervisory level employees will receive uniform training in conducting performance evaluations.

FINANCIAL IMPACT:
None

RECOMMENDATION:
It is recommended that the attached performance appraisal form be approved as the official performance appraisal/evaluation form for the City of Gautier.

ATTACHMENT(S):
New Performance Appraisal Form

CITY OF GAUTIER
PERFORMANCE APPRAISAL

Employee Name: _____ **Title:** _____

Department: _____ **Date of Appraisal:** _____

Reason for Review: ◯ **Annual** ◯ **Probation** ◯ **Promotion** ◯ **Other:** _____

Overall Rating (from page 3): 0 **Merit Increase Recommended:** ☐ **Yes** ☐ **No** ☐ **N/A**

Civil Service covered employees will be evaluated annually by their immediate supervisor. Probationary employees will be evaluated every six (6) months until transferred to covered employment. Promoted employees will be evaluated after six (6) months in their new position.

Instructions: Carefully evaluate employee's work performance in relation to the essential functions of the job. Check rating box that indicates the employee's performance. Indicate N/A if not applicable. Assign points for each rating within the scale and write that number in the Points box. Points will be totaled and averaged for an overall performance score.

Definitions of Performance Ratings:

O – Outstanding – Performance is exceptional in all areas and is recognizable as being far superior to others.
V – Very Good – Results clearly exceed most position requirements. Performance is of high quality and is achieved on a constant basis.
G – Good – Competent and dependable performance. Meets the performance standards of the job.
I – Improvement Needed – Performance is deficient in certain areas. Improvement is necessary.
U – Unsatisfactory – Results are generally unacceptable and require immediate improvement. No merit increase should be granted to individuals with this rating.

Performance Factors	Rating		Scale	Points
1. **Job Knowledge:** Detailed understanding of job requirements and responsibilities plus familiarity with both Departmental and City procedures and policies.	O V G I U N/A	☐ ☐ ☐ ☐ ☐ ☐	100 - 90 89 - 80 79 – 70 69 – 60 Below 60	
Supervisor Comments:				
2. **Accuracy:** Completes work thoroughly and completely. Pays attention to detail.	O V G I U N/A	☐ ☐ ☐ ☐ ☐ ☐	100 - 90 89 - 80 79 – 70 69 – 60 Below 60	
Supervisor Comments:				
3. **Dependability:** Ability to follow instructions, perform work and maintain high productivity in a consistent manner. Demonstrates commitment, dedication and cooperation.	O V G I U N/A	☐ ☐ ☐ ☐ ☐ ☐	100 - 90 89 - 80 79 – 70 69 – 60 Below 60	
Supervisor Comments:				

4. **Adaptability:** Effectively and willingly adjusts to changes in routines, processes, assignments and deadlines.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

5. **Initiative:** Actively seeks additional assignments. Steps in and does what is needed. Willing to learn.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

6. **Communications:** Communicates clearly and effectively, orally, and in writing. Exchanges information in a timely manner and uses confidential information with discretion.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

7. **Self-Sufficiency:** Works independently with little need for direct supervision, maintains composure during emergencies. Makes practical routine decisions.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

8. **Work/Time Management:** Effectively plans and organizes work. Productive during work time, completes work projects, duties and tasks in a timely manner.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

9. **Conduct:** Follows Rules and Policies. Respectful to co-workers; promotes teamwork. Responds and acts appropriately to confrontational situations.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

10. **Attendance:** Works as scheduled. Does not disrupt operations or shirk duties by being habitually or unnecessarily absent. Adheres to lunch schedules.

O	☐	100 - 90
V	☐	89 - 80
G	☐	79 – 70
I	☐	69 – 60
U	☐	Below 60
N/A	☐	

Supervisor Comments:

Rate employee's overall performance in relation to position duties and responsibilities.

Total Points 0 ÷ **Number of factors rated** 1 = 0 **Overall Rating**

Additional Suggestions for Improving Job Performance (to be filled out by Supervisor):

Opportunities for Professional Development within the next 12 months (to be filled out by Supervisor):

Supervisor:
I have reviewed this performance appraisal with the employee, made suggestions/recommendations for improvement or suggestions/recommendations for superior performance.

Supervisor: _____ **Date:** _____

Employee Comments:

_____

_____

_____

_____

_____

Employee Signature: _____ **Date:** _____

Department Head: _____ **Date:** _____

Human Resources Director: _____ **Date:** _____

City Manager: _____ **Date:** _____