**Ponca City Main Street**

**Employee Performance Annual Review**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainings attended since last review:

* State Training – (insert dates)
* National Main Street Conference – (insert dates)
* State Historic Preservation Conference – (insert dates)

**Job Knowledge:**

*Extent of job information and understanding possessed by employee (This item includes acquiring necessary new information)*

\_\_\_\_\_Excellent (Thorough working knowledge of all job duties)

\_\_\_\_\_ Good

\_\_\_\_\_ Average

\_\_\_\_\_ Poor

Comments:

**Quality of Work:**

*Accuracy in performance of work duties and responsibilities*

\_\_\_\_ Excellent (Consistently maintains highest work standards)

\_\_\_\_\_ Good

\_\_\_\_\_ Average

\_\_\_\_\_ Poor

Comments:

**Initiative and Supervision:**

*Extent to which employee must be guided others and takes initiative on projects and work that needs to be done at workplace.*

\_\_\_\_\_\_\_ Excellent (Employee takes extraordinary initiative)

\_\_\_\_\_\_\_ Good

\_\_\_\_\_\_\_ Average

\_\_\_\_\_\_\_ Poor

Comments:

**Communication Skills:**

*Showing respect and communicating effectively with members, staff, and others*

\_\_\_\_\_ Excellent (Consistently maintains high and effective standards of communicating)

\_\_\_\_ Good

\_\_\_\_\_ Average

\_\_\_\_\_ Poor

Comments:

**Employee Teamwork:**

*Extent to which employee cooperates with other employees and volunteers, departments and groups as appropriate and necessary*

\_\_\_\_\_ Excellent (Works exceptionally well with others)

\_\_\_\_\_\_ Good

\_\_\_\_\_\_ Average

\_\_\_\_\_\_ Poor

Comments:

**Willingness to Follow Job/Office Procedures:**

*Extent to which the employee properly follows established office / job policies and procedures*

\_\_\_\_\_\_\_ Excellent (Exceptionally willing to follow established procedures)

\_\_\_\_\_\_ Good

\_\_\_\_\_\_\_ Average

\_\_\_\_\_\_\_ Poor

Comments:

**Adaptability:**

*Extent to which employee adapts to changes at work*

\_\_\_\_\_\_\_ Excellent (Employee is highly adaptable and flexible to change)

\_\_\_\_\_\_ Good

\_\_\_\_\_\_\_ Average

\_\_\_\_\_\_\_ Poor

Comments:

**Attendance:**

*Extent to which employee maintains sited requirements of 40 hours per week for set salary and attends additional activities and meetings.*

\_\_\_\_\_\_\_ Excellent (Employee always present and on-time)

\_\_\_\_\_\_ Good

\_\_\_\_\_\_\_ Average

\_\_\_\_\_\_\_ Poor

Comments:

**Presentation of Self:**

Employee emulates through general physical and verbal appearances, a positive impression and image to people inside and outside the office.

\_\_\_\_\_ Excellent (Represents self in an exceedingly favorable manner)

\_\_\_\_\_\_ Good

\_\_\_\_\_\_ Average

\_\_\_\_\_\_ Poor

Comments:

**Overall appraisal of employee performance:**

\_\_\_\_\_\_ Excellent (Top-notch performance, superior contributions)

\_\_\_\_\_\_\_ Good (Consistently above-average, high volume of work successfully completed, very good job performance)

\_\_\_\_\_\_\_ Average (Competent performance, areas of improvement needed) \*\*specified below\*\*

\_\_\_\_\_\_\_ Poor (Performance below standard, improvement needed to remain employed with Ponca City Main Street.) \*\*specified below\*\*

Comments:

**General Comments:**

Strengths on which to build:

Areas that need improvement:

Plans for improvement:

**Employee Participation: (To be completed after the review……)**

Thoughts regarding this review:

Areas of strength you’d like to build upon for yourself with this job:

Areas of additional job training, guidance and information you’d like to receive for this job:

Areas of interest (things you’d like to try in job, or things you enjoy with job that you’d be interested in doing more of):

Additional thoughts or comments regarding your employment with Ponca City Main Street:

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

Program Director Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board President Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_