YOUTH INTERVENTION WORKER

Employee Performance Review



EMPLOYEE INFORMATION					
Name LEITH MOKAY.			Employee ID		
Job Title Community you	mt Wis	ERVENTION	J Date Oct	aa/18	?,
Department MOYS		•	Manager		
Review Period					
RATINGS					
	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent
Job Knowledge				8	
comments when is very la	d of con	ment y	, courts	, youth,	Coworkers
Work Quality				8	
Work Quality Comments Kerth always of the first comments of the him	jues.	100% me	matter u	hat ta	sk is
Attendance/Punctuality					
comments for work way	Defore	starting	9:00am	always.	Stans up
Initiative					
comments and plans po	d inition	the he reces	Custens. Cu his c	to his	took are
Communication/Listening Skills				8	\Box
Communication/Listening Skills Calles Emails Comments	even	polay. a	sk Jen	Clan	becom
Dependability					8.
Keith can as	eways t	se clape	nded co	. no mai	Her what i
Comments asked Keits as	auts. N	o metter	what pr	ogram	
Overall Rating (average the rating numbers a	above)				
EVALUATION					
ADDITIONAL COMMENTS Confine	nee ca	lls isitS			
GOALS (as agreed upon by employee and manager)					

VERIFICATION OF REVIEW	
By signing this form, you confirm that you have discussed this review in dindicate that you agree with this evaluation.	letail with your supervisor. Signing this form does not necessarily
Employee Signature	Date
Manager Signature	Date Oct 10/18.

Recommend pay increase

YOUTH INTERVENTION CUTIENT . \$35, 144.00 Falls.



EMPLOYEE INFORMATION			Employee ID		
Name Kerth-Mckey		1 B d 194	Date Mau	1 16-116	
JOB TITLE Youth Intervention - K	ozo <i>p</i> onikci			Vernon Morris	
Department MCYSY!	"		<u> </u>	at of the same of the same of	
Review Perlod April 2014 - May 16		1-m	. <u> </u>	The second of th	
RATINGS.			col-Caton	4 = 6000	i = Excellent
	1 = Poor	2 = Fair 3	= 24(3)4C(5)1	4 = Good	X
Job Knowledge	<u>ب</u>	' "			
: comments: Very good understand	ding of the	V.I. Progra	am + po	duov.	<u></u>
	П		ابا		
comments Keith implements all	functions to	shipatices 16	the y.I.	Program Very w	<u>lell</u>
Commens Valle In he.					X
Attendance/Punctuality	 C 144	in lette	and.	-	
comments This area of work	pertovmano	z w very		\ <i>y</i>	. =-
Initiative			.	X	_
comments Works with minim	ral superior	wion.			
Communication/Listening Skills	<u> </u>			¥ 4.5	
comments Kath communicates	very well.)	100 m m 1	··· ·	
Denendability					
comments Keith always mo	ukes it k	nown of	his loc	ation of work	
Overall Rating (average the rating numbers		••	•••	27.5 / 30	pts
EVALUATION	مسمه از ویستنیستانی و ر و د دهه می از مستوند و د او	neng a sanganunungan sa punu S		24 - 24 - 250-man de 10 d	
ADDITIONAL COMMENTS					-
Keith Makay is an ex	cellent es	w blodge.			
GOALS		1.164		a games pro 44 rm	
employee and manager)	training	requested	•		
Keith - First Aid + CPR Keth - data base + soft	works train	ing !	a. 11	5 M	
- 100 Page 700 - 1140 Page 700	With a summer of a book	(** (******************************	and a standarder :	e si em aumando i tras demandramentos qu	
VERIFICATION OF REVIEW	ا ا د مسادر وسمد ابلاد الدموم وسالار مارد	roulous in closell with	vour subervia	or. Signing this form does	not necessarily
By signing this form, you confirm that you had indicate that you agree with this evaluation.	ve gisaisseg tills i				gyangan ha bahari sah I h
Employee Signature			Date		
Manager Signature	W	1 ngayan 3 46 km) m	• Date	May 16/16	

Employee Performance Review

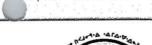


EMPLOYEE INFORMATION							
me Keith McKay			Employee ID				
Job Title			Date M	A-1 16	116.		
Department MCYS-11			Manager	ERNON	monio		
Review Period APRIC 2014	- MA-116/1	16					
RATINGS	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent		
Job Knowledge	1 – 1001	2 - Tuli			₩.		
Comments Creat une	1 F al	o F	positi	+ My	inement of		
Comments		Riogram			9		
Work Quality				A -			
L.	plenet	sall an	eus aftl	e projece			
Comments	V						
Attendance/Punctuality					4		
Comments	Cemanji	ing worth	of him	have to	- look		
	bed.	Tie work	on him		П		
Initiative	ur e h	12	Kalua	ntime			
Comments	ks with	cpartner	o, works	with	munal		
Communication/Listening Skills	Spen			U 43	·		
	creat a	sting 5	the.				
Comments	mys calls	5 cilwan	shell,	- wenk			
Dependability				7	A		
Comments					27.5		
Commence					130		
Overall Rating (average the rating number	ers above)				, ,		
ADDITIONAL COMMENTS Declear	al house	·luanta s	, works	muni	ال		
Spein Spein	sica		, works				
GOALS (as agreed upon by	iel + CPR	2.	7				
employee and manager)	nk.	- 20	00.				
		Daise	6.				
		,					
VERTERATION OF BEVIEW			ut.	anina this form d	loes not necessarily		
VERIFICATION OF REVIEW By signing this form, you confirm that you	have discussed this	review in detail wi	th your supervisor. Sign	grilling trills rottin to	ocs not necessarily		
VERIFICATION OF REVIEW By signing this form, you confirm that you indicate that you agree with this evaluation	have discussed this n.	review in detail wi	tn your supervisor. Si	gning this form t	ocs not necessarily		
By signing this form, you confirm that you	have discussed this ก.	review in detail wi	Date	griing alis form d	oes not necessam,		

Employee Performance Review



EMPLOYEE INFORMATION							
Name Keith McKeuf.			Employee ID				
Job Title CYIW			Date Sey	24 24/	14.		
Department			Manager				
Review Period FPR 1 - 5	ept30	2013	3-2014.				
RATINGS		10					
	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent		
Job Knowledge				1			
Comments July	12011.	genter	0 0				
Work Quality					+		
Comments							
Attendance/Punctuality					4		
Comments							
Initiative				X			
Comments							
Communication/Listening Skills							
Comments							
Dependability							
Comments							
Overall Rating (average the rating number	ers above)						
			era - Meobras Justinii iliya a 1805 ya				
EVALUATION	1						
ADDITIONAL COMMENTS year	ystall.			1			
GOALS (as agreed upon by employee and manager)	n of Wit	th Sev	ener. Rig	y to fe	My,		
VERIFICATION OF REVIEW							
By signing this form, you confirm that you indicate that you agree with this evaluation	have discussed this re n.	eview in detail w	ith your supervisor. Sig	ning this form do	es not necessarily		
Employee Signature			Date				
Manager Signature			Date				



Employee Performance Review

EMPLOYEE INFORMATION					Empleyee ID		្រ ទីត		
Name Keith MKoy. Job Title Y.I. Koso Goniled	Al facilità de se in server rese	was one good of the		111: 47:5633 e	Employee ID Date	m+ 2	4/1		· · · · · · · · · · · · · · · · · · ·
Department Y. I. Koso Gon Ico	<i>x</i> .				Date Sc Manager	1/2		1:-	
Review Period April 01/14- S	ept. 30	0/14			anje spelie z je ka strone (Herrore	Veru	ч. Г	TOYTIS	
		· V.		nenn en 2 00		Lighter burness standa			
RATINGS	1 = Poor		2 = Fair	3	3 = Satisfactory	4 = G	ood	5 = Exc	ellent
Job Knowledge				212	ū	×		Π	
Comments									
Work Quality	Ē]	8	
Comments									
Attendance/Punctuality					E .	C	1	×	.
Comments									
Initiative						D	Κ		
Comments									
Communication/Listening Skills	Г	1.18(# 01.10 + 1.10	٦			×	₹	Ε]
Comments									
Dependability		ne me nom			П	L	1	Þ	(
Comments									
Overall Rating (average the rating numbers	above)					Z	170	f 30	
EVALUATION								na amiro i	
ADDITIONAL COMMENTS		*				. at 1823			
Keith McKory is a g	wod e				2 日间 2 3	C MARINE SINE		et si	FRENCT NO. 1

employee and manager)

Employee Performance Review



EMPLOYEE INFORMATION					
Name KETH MODAL			Employee ID		
Job Title Community 4	MIHTUD	TERUENTIO	N Date M	ay 29	1/13.
Department MC 45 - 1			Manager		
Review Period	er 1, 20	DO1 - /	nay 29-1	3.	
RATINGS	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent
Job Knowledge				\times	*
Job Milamenge					
Comments					
Work Quality				X	*
Comments	verywe	90			
Comments			planes,		>
Attendance/Punctuality					X
Comments					
			П	X	
Initiative - Prevention	u Tok			~	
Comments				3	
Communication/Listening Skills				X	
				/	
Comments					
Dependability					X
Comments					
Comments					
Overall Rating (average the rating number	ers above)				
ADDITIONAL COMMENTS					
	omote PRO	OGRAM.	_ /		
Computer T	PANING.	hend	Emal		
	sucudof	Lieucit	cor		
GOALS (as agreed upon by					
employee and manager)					
WEDGE OF BEIGEN					Harris Balance
VERIFICATION OF REVIEW By signing this form, you confirm that you	have discussed this	review in detail w	ith your supervisor. Si	gning this form a	loes not necessarily
By signing this form, you confirm that you indicate that you agree with this evaluation	7.		0000 6 Book 6		
Employee Signature			Date		
Manager Signature			Date		