COMMUNITY RELEASE AND REINTEGRATION WORKER

Employee Performance Review



EMPLOYEE	INFORMAT	ION						
Name Charles Benson					Employee ID	Employee ID		
Job Title Community Release and Reintegration Worker					Date Dec	12, 2019		
Department	RELREI				Director	Danielle Wood		
Review Period	1	Annual perf	formance evaluati	on				
Organization with								
RATINGS			1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent	
Job Knowled	dge						5	
Comments	-Skilled work	er with knowledge endering services to gness to learn and	o some of the mo	st vulnerable mer	unctioning of the adm mbers of the commur	ninistration of justice nity. Charles has de	e, working with monstrated a	
Work Qualit	у				3			
Comments	Weagamow	ways asking quest and cares a lot abo ncil, bail program p	out improving just	ice in his commur	sharing knowledge. C nity. Needs to improv t #s.	harles is very involve working with poli	ce, duty counser,	
Attendance	/Punctuality						5	
Comments	-Charles is a he is sick.	t work every day. I	He understands he	er obligations to o	call/email/text when I	ne is unable to atte	nd work or when	
Initiative					3			
Comments	developing r	elationships with lo	ocal partners and	stakeholders for t	vice-providers. He ne pail and reintegration c strong with less dire	. He fleeds to get o	nt numbers by ut there, get	
Communica	tion/Listenii	ng Skills					5	
Comments	-Charles con	nmunicates questio	ons and issues as	they arise. Needs	to continue to comm	nunicate issues.		
Dependabil	ity						5	
Comments	-Charles is a teleconferer	accountable. He is a aces and gets repor	at work, he answe ts in on time.	ers his emails, he	ensures his clients a	re looked after. Alv	vays attends team	
Overall Rat	ing (average	the rating numbers	above) 26					
EVALUATI	ON							
ADDITIONAL	_ COMMENTS		environment.		vers, the bail prograr	n, and NALSC organ	nization.	
GOALS (as agreed L employee ar	upon by nd manager)	-going Poster - voice - get	to poler email-	ice star - C.B Ther	tion-Do to set u e.	p.	te give	
VERIFICA	TION OF R							
By signing to indicate that	his form, you d t you agree wi	confirm that you ha th this evaluation.	eve discussed this	review in detail v	with your supervisor.	Signing this form do		
Employee Si	ignature (- Karl	i Z		Date	1011	. /	
Director Sign	nature $igcup$	Dance	elle li	lul	Date [Jec 12/	[9	