



# LEGAL AID

Employee Performance Review

EMPLOYEE INFORMATION	
Name	Jocelyn Rae
Job Title	LEGAL AID ASSESSMENT
Department	LEGAL AID
Review Period	JUNE 14 / 11 TO SEPT 25 / 12
Employee ID	
Date	SEPT 25 / 12
Manager	MJ ROBINSON

RATINGS	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent
<b>Job Knowledge</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	WORK WITH HEATHER ON USINA TASK ORGANIZER / WORK LIST.				
<b>Work Quality</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	MORE ATTENTION TO DETAIL AND MORE FACTS IN FAMILY APPLICATIONS AND CFSA.				
<b>Attendance/Punctuality</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	9:30 TO 5:30 - WORKING WELL				
<b>Initiative</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	NEEDS TO USE THE SOURCE TO FIND SOLUTIONS OR INFORMATION.				
<b>Communication/Listening Skills</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments	TELEPHONE ETIQUETTE NEEDS MORE ATTENTION ✓				
<b>Dependability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments					
<b>Overall Rating</b> (average the rating numbers above)	FAIR TO GOOD				

EVALUATION	
ADDITIONAL COMMENTS	- TAKE THE TIME TO LOOK UP SOLUTIONS AND INFORMATION.
GOALS (as agreed upon by employee and manager)	MORE TRAINING ON PEOPLESOFT ON CONTRIBUTION AGREEMENTS. HEATHER TO HELP GET IT UP ON SOURCE. USE WORK LIST AND TASK ORGANIZER FOR FOLLOW-UP

VERIFICATION OF REVIEW	
By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.	
Employee Signature	Jocelyn Rae
Manager Signature	Heather Bulbo
Date	Sept 25 / 12
Date	Sept 25 / 12