



LEGAL AID

Employee Performance Review

EMPLOYEE INFORMATION

Name	Jocelyn Rae	Employee ID	
Job Title	Assessment	Date	Oct 27/13
Department	LAO	Manager	MT Kobus
Review Period	Sept 25/12 to Oct 22/13		

RATINGS

	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent
Job Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	Is now using task organizer				
Work Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	- Need more notes in Peoplesoft - Must always sign applications				
Attendance/Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	Phone to be turned off and only used on breaks. Emergency to come through switchboard				
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	Doing well on contributed agreements and workload				
Communication/Listening Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments	Noticeable improvement. Continue to be aware of the issue.				
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments	appreciate willingness to travel when required.				
Overall Rating (average the rating numbers above)					

EVALUATION

ADDITIONAL COMMENTS

- Working hard to address issues
- Very willing to help others

GOALS (as agreed upon by employee and manager)

- Take an hour. Phone on DND and read job aids & source material.
- Use outlook for forward planning and future task tasks.

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	Date	Oct 27/13
Manager Signature	Mary Kobus Heather Bault	Date	Oct 27/13 Oct 22/13