



LEGAL AID
Employee Performance Review

EMPLOYEE INFORMATION	
Name: Jocelyn Rae	Employee ID:
Job Title: Assessment Officer	Date: January 24, 2022
Department: Legal Aid	Manager: Don Rusnak Heather Baillie
Review Period: October 2021 – January 24, 2022	

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"/>
<i>Comments:</i>	Processing applications More training processing amendments					
Work Quality		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>	More training on amendments - Family					
Attendance/Punctuality		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Comments:</i>	Always advises manager and staff					
Initiative		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Comments:</i>	Assist clients. Assist CLW with courts Covers courts when required					
Communication/Listening Skills		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Comments:</i>	Email and respond to office staff for updates, follows up with clients Follows direction from Manager					
Dependability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Comments:</i>	Dedicated employee					
Overall Rating (average the rating numbers above)						

EVALUATION	
ADDITIONAL COMMENTS:	Dedicated employee
GOALS (as agreed upon by employee and manager)	Adjusting to working from home.

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: <i>Jocelyn Rae</i>	Date: <i>Feb 10/22</i>
Manager Signature: <i>Heather Baillie</i>	Date: <i>Feb 9/22</i>