

OKALOOSA COUNTY SCHOOL DISTRICT  
PERSONNEL SERVICES DEPARTMENT  
**EVALUATION OF EDUCATION SUPPORT PERSONNEL**

MIS 5136  
REV 4/14

Employee's Legal Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

EID: \_\_\_\_\_ Location: \_\_\_\_\_

**JOB KNOWLEDGE/WORK HABITS**

	Meets Expectations	** Does Not Meet Expectations
Demonstrates efficient use of time, planning and organizational skills.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates ability to work with little or no direct supervision.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates an ability to learn new skills and adapts to change.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a willingness to accept authority and direction.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates proficiency in job knowledge and performs accordingly.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a positive attitude toward job/tasks.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates good judgement and common sense toward assigned duties.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates stability and an ability to handle stress and be tolerant.....	<input type="checkbox"/>	<input type="checkbox"/>

**INTERPERSONAL SKILLS**

	Meets Expectations	** Does Not Meet Expectations
Demonstrates appropriate interaction with staff, clients, students and/or parents.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates awareness to the needs of staff, clients, students and/or parents.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate oral skills when communicating with others.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate written skills when communicating with others.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate relations with supervisor and peers.....	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates loyalty, reliability, honesty and integrity on the job.....	<input type="checkbox"/>	<input type="checkbox"/>

Employer  
Comments:

Employee  
Comments:

**Signatures**

Note: Signatures indicate the two parties discussed the completed evaluation form. It does not necessarily denote agreement.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Evaluator

\_\_\_\_\_  
Date

cc: Principal/Supervisor  
Employee  
Personnel Department

**\*\* Success Plan Attached**