

**DOUGLAS COUNTY, NEBRASKA  
CIVIL SERVICE COMMISSION**

**Employee Performance Appraisal (Non-Supervisory)**

**(A) Employee Information:**

**(B) Instructions:** Review the manual for performance appraisals giving special attention to the rating scale used for non-supervisory employees. The position description should be reviewed prior to beginning this process. Specific questions may be referred to the Civil Service Commission Office for clarification. (444-6125)

**(C) Rating Scale:** The scale below is to be used for the purposes of this appraisal. Assign the numerical rating which most aptly describes the performance in the space provided.

0 = **Unsatisfactory:** Employee consistently does not achieve minimal requirements.

1 = **Marginal:** Employee achieves most of the requirements of the position. Improvement is slow and more direct supervision is required than is normally expected.

2 = **Satisfactory:** Objectives for this position are being met. Performance represents that which is expected from a competent and qualified employee.

3 = **Commendable:** Employee frequently exceeds the expectations for this position. Performance reflects progressive improvement and acceptance of additional responsibilities.

4 = **Superior:** Superior performance is the norm rather than the exception. Achievements on a day-to-day basis exceed the expectations for this position. The employee requires minimal or no supervision and easily accepts new duties.

**(D) General Factors:** Consider each factor separately. Comments are to be made for each factor. Refer to manual for optional factor. Type or print comments.

1. **Job Knowledge:** Consider how well the employee exhibits, through day-to-day performance, an understanding of the function and purpose of the job performed. Consider the employee's overall understanding of the department and the employee's flexibility to perform all the duties of the position.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
[Rating] \_\_\_\_\_

2. **Communication and Cooperation:** Consider how well the employee establishes and maintains effective working relationships and communicates with the public, co-workers and supervisors.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
[Rating] \_\_\_\_\_

3. **Quality of Work:** Consider to what degree the employee performs error free work. Neatness of work, completion of all aspects of a task, adherence to standards, etc. should be considered.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
[Rating] \_\_\_\_\_

4. **Productivity:** Consider the amount of work performed and effort put forth by the employee to meet or exceed standards.

Comments: \_\_\_\_\_  
\_\_\_\_\_ [Rating] \_\_\_\_\_

5. **Dependability:** Consider whether the employee accounts for a full day's work and performs assigned duties. Determine whether the employee consistently reports to work on time and observes county policy on leave time.

Comments: \_\_\_\_\_  
\_\_\_\_\_ [Rating] \_\_\_\_\_

6. **Optional Factor**

(Refer to instructions manual).

\_\_\_\_\_ Initial EO/DH

Statement: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_ [Rating] \_\_\_\_\_

(E) What aspect(s) of this individual's performance might hinder future development or cause difficulty in the present position. (Do not assign rating.)

Comments: \_\_\_\_\_  
\_\_\_\_\_

Performance Goals: (See Manual) \_\_\_\_\_  
\_\_\_\_\_

(F) In which area(s) does the employee contribute most to their present position and the County? (Do not assign rating.)

Comments: \_\_\_\_\_  
\_\_\_\_\_

(G) **Overall Rating:** Take scores from all factors, total and divide by number of factors used.

**Total score** \_\_\_\_ **divided by** \_\_\_\_ **No. of Factors** = **Overall Rating** \_\_\_\_\_

(See manual for additional explanation)

(H) \_\_\_\_\_ (Rater's Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

(I) **Employee's Comments:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ (Employee's Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

\*Employee signature does not denote agreement or disagreement with the contents of the appraisal.

(J) **Departmental Approval by:**

\_\_\_\_\_ (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

(K) **Civil Service Review by:**

\_\_\_\_\_ KAREN A. BUCHE \_\_\_\_\_ HUMAN RESOURCES DIRECTOR \_\_\_\_\_ (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)