

**Emery County School District**  
**Support Staff Employee Evaluation – Educational Assistant – English Language Learner (ELL)**

Employee \_\_\_\_\_

School \_\_\_\_\_ Evaluation Date \_\_\_\_\_

1 = Not Effective\*

2 = Effective

3 = Highly Effective

\*Comment Required

**•WORKPLACE SKILLS**

**•INTERPERSONAL SKILLS**

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**•ADAPTABILITY**

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Is open to alternatives and suggestions – is flexible	1	2	3
Maintains composure in stressful situations	1	2	3
Demonstrates good judgment/makes reasonable decisions	1	2	3

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**PROFESSIONAL RESPONSIBILITIES**

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Keeps informed and adheres to policies and regulations applicable to the position	1	2	3
Willingly shares ideas and expertise with colleagues	1	2	3
Handles confidential/sensitive information appropriately	1	2	3
Performs other job related duties as assigned by the teacher, principal or supervisor	1	2	3
Promptly and effectively responds to concerns and complaints	1	2	3
Supports school and district goals and policies	1	2	3

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**OVERALL ANNUAL RATING (Summative) 1 2 3**

(While the summative rating is based on an overall summary of all standards, a rating of 1 in any standard could result in an employee being placed on probation for improvement. If satisfactory improvement is not made within the specified time period, non-renewal or termination could result)

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Self Improvement Goal for Next Year \_\_\_\_\_

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\*Evaluator Comments: (Required for #1 ratings)

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This evaluation represents my best judgment of the employee's performance. I hereby recommend:

\_\_\_\_ Employee be retained as a Provisional Employee (Policy GDA)

\_\_\_\_ Employee be retained as a Career Employee (Policy GDA)

\_\_\_\_ Employee be retained as an At-Will or Temporary Employee (Policy GDA)

\_\_\_\_ Employee be put on probation

\_\_\_\_ Employee be terminated or non-renewed

Signature of Principal/Supervisor/Designee \_\_\_\_\_ Date \_\_\_\_\_

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This evaluation has been discussed with me and I have received a copy.

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_  
(Employee's signature does not necessarily imply agreement or approval of the evaluation results)

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**Employee Comment:** (Please indicate what you feel your supervisor can do to help you improve in your job performance – use another sheet if necessary)