ORANGE COUNTY
PERFORMANCE EVALUATION – DEPARTMENT DIRECTORS

Employee Number _____

Employee _____ Hire Date _____ Position _____

Period Covered: From: _____ To: _____ Department: _____

1. Overall Performance Rating

During the performance cycle, the employees overall performance is judged to be (check the appropriate rating below box):

☐ ***Unsatisfactory*** ☐ ***Below Satisfactory*** ☐ ***Satisfactory*** ☐ ***Above Satisfactory*** ☐ ***Exceptional***

Comments

Employee Name _____

Comments (Continued)

Employee Name _____

2. Development and growth Potential:

Include comments on employee's major strengths, accomplishments made during this review period and development achieved since the last performance evaluation.

3. Completed Goals and Objectives:

Review the results of goals and objectives completed within this performance cycle.

4. New Goals and Objectives:

List the objectives to be accomplished within the next performance cycle. Arrange in order of priority.

5. Comments by Rated Employee:

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6. Authentication: (Employee's signature acknowledges that the performance evaluation has been reviewed with the rating official. It does not indicate agreement with the rating.)

Employee _____ Date _____

7. Approval:

Merit Pay Increase (if any) $_____

County Administrator _____ Date _____