**Part III MT. SAN ANTONIO COMMUNITY COLLEGE DISTRICT MANAGEMENT EMPLOYEES EVALUATION FORM**

**Management Employee:**

**Title:**

**Department:**

**Evaluator:**

1. E--Exceeds Expectations
2. M--Meets Expectations
3. NI--Partially Meets Expectations/Needs Improvement
4. DN--Does Not Meet Expectations (significant improvement required)
5. Review Last Year’s Performance (A) [to be completed by the evaluator]

|  |  |  |
| --- | --- | --- |
| **Management**  **Employee Skills** | **Description: Evaluation on their commitment to equitable outcomes and inclusive practices should be a component in each category** | **Rating** |
| Communication | Responds to audience appropriately, uses clear and effective listening, speaking, signing and writing skills to engage in honest, open dialogue at all levels of the college and its surrounding community  [AACC Leadership Competency] |  |
| Project Management | Creates effective project implementation plans, secures appropriate resources, and meets deadlines |  |
| Productivity | Follows through on assignments and work commitments, manages time effectively, maintains quality under deadlines, communicates the need for additional assistance in a timely manner |  |
| Problem Solving | Effectively assesses, analyzes, and responds to program and personnel issues (as appropriate) |  |
| Planning/Program Review | Demonstrates planning skills for short- and long-term goals; uses data for analysis and review of own work and work of the unit(s) under that evaluator’s supervision; conducts outcomes assessment for his/her unit’s work |  |
| Resource Management | Equitably and ethically sustains people, processes, and information as well as physical and financial assets to fulfill the mission, vision, and goals of the community college [AACC Leadership Competency] |  |
| Comments (To what degree did the manager demonstrate these skills and values?): | | |

1. Review Last Year’s Performance (B)

|  |  |  |
| --- | --- | --- |
| **Leadership Skills/Values** | **Description: Evaluation on their commitment to equitable outcomes and inclusive practices should be a component in each category** | **Rating** |
| Integrity | Operates with transparency and honesty |  |
| Inclusiveness/  Collaboration | Effectively collaborates within and outside of his/her own area, appropriately includes others in planning and implementing activities |  |
| Innovation/Creativity | Displays appropriate original thinking |  |
| Humility/Sensitivity | Respects the work of others; displays sensitivity to a diverse  work and learning community; readily admits when he or she is wrong or lacks information/knowledge |  |
| Alignment of Work to College Mission and Core Values | Carries out duties in a manner that reflects the college mission and core values |  |
| Comments (To what degree did the manager demonstrate these skills and values?): | | |

1. Establish Work and Professional Goals for Next Year

|  |  |
| --- | --- |
| Initial Goals that reflect a commitment to equitable outcomes and inclusive practices (based on accomplishment of previous goals, current Administrative Self-Evaluation, and current peer and/or direct report input)  **To be completed prior to evaluation meeting** | |
| Goal | Action Plan, Criteria for Satisfactory Performance, Timeline |
|  |  |
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|  |  |
| --- | --- |
| Additional Goals that reflect a commitment to equitable outcomes and inclusive practice (based on manager’s current evaluation)  **To be completed at evaluation meeting** | |
| Goal | Action Plan |
|  |  |
|  |  |

My signature acknowledges that I have read and discussed this evaluation with my manager. My signature does not necessarily mean that I concur with the evaluation, and I understand that the evaluation will become a permanent part of my personnel file. I have the right to submit written comments within ten (10) working days and to have those comments attached to this evaluation for inclusion in my personnel file.

| **Name** | **Signature** | **Date** | **Date** |
| --- | --- | --- | --- |
| **Management Employee Signature:** |  | **Date:** |  |
| **Evaluator Signature:** |  | **Date:** |  |
| **Reviewed by** (Next-Level Manager)**:** |  | **Date:** |  |

# Comments of Next-Level Administrator (Optional):

Distribution:

Manager

Human Resources