

Performance Evaluation

For Use by All Full-time Employees

This instrument aims to measure an employee's aptitude and performance. Your careful evaluation provides insight to needed improvements that fulfill both department and overall objectives of SBTS.

Employee Name:	Title:	Dept.
Supervisor Name:	Title:	Time Under Current Supervisor:

PERFORMANCE RATING SCALE		
Performs with Excellence	3	Exceeds expectations. Contributions impact the entire institution and community. Deserving of superior recognition.
Performs Satisfactorily	2	Meets expectations for position requirements and standards. Viewed as a reliable and meaningful contributor.
Needs Improvement	1	Does not meet expectations, performance is less than required. Must take corrective action to improve their contribution. Support any "1" ratings and provide a SMART Action Plan attached to this form.

JOB KNOWLEDGE AND DEVELOPMENT:

3 2 1

Demonstrates technical and professional knowledge and ability. Acquires and integrates new skills and knowledge to enhance SBTS operations and image.

QUALITY OF WORK:

3 2 1

Accomplishes tasks and concerns for all areas involved; vigilant and accurately checks processes and tasks. Strives to increase efficiency, and create professional deliverables.

QUANTITY OF WORK:

3 2 1

Uses systematic methods to accomplish more in less time. Consistently meets all deadlines. Avoids confusing activity and organizes effectively to achieve greater results.

COMMUNICATON:

3 2 1

Leading others to a clear understanding and desired outcomes. Ensures timely delivery of the right information to the right audience. Prudently handles sensitive and confidential information.

RELIABILITY:

3 2 1

Dependable, completing projects on time. Trustworthy, persistent, resilient, and effectively handles the right information to the right audience. Prudently handles sensitive and confidential information.

INITIATIVE AND CREATIVITY:

3 2 1

The ability to plan work and to go ahead with a task without being told every detail; demonstrates ability to make constructive suggestions.

3 2 1

DECISION MAKING AND JUDGMENT:

Makes sound decisions. Bases decisions on fact rather than emotion. Takes into consideration impact of decisions on others, SBTS resources and values.

CUSTOMER SERVICE ORIENTATION:

3 2 1

Delivers an outstanding customer experience by satisfying customer needs and harmoniously building long-term relationships. Makes good things happen for others.

ATTENDANCE AND PUNCTUALITY:

3 2 1

Demonstrates faithfulness with scheduled hours of operation. Represents one's self in a positive and professional manner consistent with SBTS core values.

Please support any ratings of "1" (Needs Improvement) with an itemized SMART plan for improvement in the specific area of weakness – using the back of this form.

SUPERVISOR: Please provide additional comments on performance, accomplishments and objectives

Performance Evaluation

Employee Acknowledgement

I understand that this performance evaluation is not an employment agreement or contract. As an employee of The Southern Baptist Theological Seminary, I am expected to participate in various activities; to interact and work cooperatively to assist students, staff and faculty and the community in the accomplishment of various goals; to represent myself and SBTS in a positive, professional manner consistent with the core values; and to safeguard sensitive and confidential information from intentional and unintentional disclosure.

I am expected to maintain a current working knowledge of policies, procedures and guidelines necessary to answer work-related questions and to provide assistance to students, staff and faculty and the general public in a timely and courteous manner. I am also expected to perform other duties as may be assigned by my supervisor and to contribute to the team efforts of the department and to assist SBTS in achieving its strategic goals. I must abide by all laws, SBTS policies and guidelines. Further, I understand that I may request a copy of such policies, procedures and guidelines from my supervisor, area Vice President, Department Head or the Office of Human Resources, or access such information on Inside Southern.

My signature indicates that I and my rating supervisor have reviewed the contents of this evaluation and that I have received a copy.

Employee Printed Name	Employee Signature	Date
Supervisor Printed Name	Supervisor Signature	Date
Reviewer Printed Name	Reviewer Signature	Date