

ASSISTANT MANAGER, FOOD SERVICE
Summative Appraisal Form

Name _____ Location _____

Appraisal Period: From _____ to _____ Date of Review _____

Directions

The following statements describe the employee who achieves success. Based on cumulative performance information, the evaluator estimates the employee's effectiveness in meeting each criterion. Rate each criterion using the scale below that most closely describes the employee's attainment of that criterion. For each domain, a comment area is provided for general statements and/or recommendations.

Rating Scale

- 5 Clearly Outstanding:** Performance is consistently far superior to what is normally expected.
- 4 Exceeds Expectations:** Performance demonstrates increased proficiency and is consistently above expectations.
- 3 Meets Expectations:** Performance meets expectations and presents no significant problems.
- 2 Below Expectations:** Performance is consistently below expectations and significant problems exist.
- 1 Unsatisfactory:** Performance is consistently unacceptable.
- 0 Not Applicable**

JOB PERFORMANCE STATEMENTS

Cafeteria Management

- ____1. Assists Manager in producing and maintaining work schedules and production records.
- ____2. Directs daily activities in kitchen and cafeteria.
- ____3. Maintains all serving schedules and serves all food items according to menu specifications defined by departmental policies and procedures.
- ____4. Works cooperatively with campus principal to accommodate temporary schedule changes, special serving requirements and to resolve personnel problems.
- ____5. Assists manager in supervising and training employees at campus level, promoting efficiency, morale, and teamwork.
- ____6. Ensures that the Standard Operating Procedures Manual is followed to facilitate communication and job expectations in the areas of health, hygiene, personnel, funding, resources, etc.

COMMENTS: _____

Policy, Reports, and Law

- ____7. Ensures that food is produced safely and is of high quality according to policies, procedures, and department requirements.
- ____8. Maintains accurate reports of daily and monthly financial, production, and activity records.
- ____9. Maintains and submits accurate information for payroll reporting (time cards, tardiness, and absenteeism).
- ____10. Learns entire counting and claiming, and money handling procedures, to include computer programs.

COMMENTS: _____

Safety

- ____11. Ensures that food items are stored in safe and hazard-free environment.
- ____12. Establishes and enforces standards of cleanliness, health, and safety following health and safety codes and regulations.
- ____13. Maintains safe work environment.

COMMENTS: _____

Inventory and Equipment

- ____14. Ensures that appropriate quantities of food and supplies are available, by ordering appropriate quantities and according to the menu.
- ____15. Assists in checking in orders and conducts end of month inventories
- ____16. Maintains logs on all equipment maintenance required within campus food service department.
- ____17. Performs preventive maintenance and reports needed equipment repairs.
- ____18. Recommends replacement of existing equipment to meet department needs.
- ____19. Assists in conducting annual physical equipment and supplies inventory.
- ____20. Assists training cafeteria workers and makes sound recommendations about the assignment, discipline, and retention of cafeteria personnel.
- ____21. Ensures that the quality control system to ensure employee safety is followed.

COMMENTS: _____

Other

____22. Performs any other duties assigned by supervisor.

____23. Maintains confidentiality of information.

COMMENTS: _____

Supervisory Responsibilities

____24. Assists manager in supervising and evaluating food service workers assigned to campus cafeteria.

COMMENTS: _____

What strengths does _____ possess?

What are some improvements _____ can make to ensure a higher degree of success for students on this campus/department?

Summative Conference Comments:

Recommendation of Evaluator: I have read and received a copy of this evaluation. I have reviewed this instrument.

- ____ Renewal and/or Extension of Assignment
- ____ Non-renewal of Assignment
- ____ Termination of Assignment
- ____ Non-extension of Assignment

Administrator's (Print Name)

Date

Administrator's Signature

Date

Employee's Signature

Date