

**COMPUTER TECHNICIAN (CTE)
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

Installation

- ____ 1. Installs and upgrades computers and peripherals throughout the CTE department.
- ____ 2. Installs network cabling and network peripherals throughout the CTE department.
- ____ 3. Relocates computer hardware, peripherals, and equipment as needed.
- ____ 4. Installs and configures software as needed.
- ____ 5. Assists with the installation, maintenance, troubleshooting, and repair of data communications circuits and equipment.
- ____ 6. Works with district's technology personnel to administer Local Area Network (LAN) and connections to Wide Area Network (WAN).
- ____ 7. Assist in the set-up and relocating of computer furniture to ensure computer connectivity.

COMMENTS: _____

Equipment Repair and Maintenance

- ___ 8. Diagnoses and repairs equipment, including printers, terminals, active sound, active board, LCD, document camera and laptop computers.
- ___ 9. Coordinates with other staff for the purpose of completing projects/work order efficiently.
- ___ 10. Services equipment according to established preventive maintenance schedule.
- ___ 11. Maintains accurate updated records of preventive maintenance of all technology and media equipment.
- ___ 12. Maintains accurate records of time and materials required to perform repairs and service.
- ___ 13. Maintains accurate inventory, software and maintenance records of CTE classroom, office technology and media equipment.
- ___ 14. Assists in acquiring information for purchasing of new and replaced equipment.
- ___ 15. Assists and maintains the development of CTE Technology needs assessment for the purpose of staff development and continuing education requirements needed for teacher and student certifications.
- ___ 16. Prepare requisitions for computer hardware and software purchases.

COMMENTS: _____

Safety

- ___ 17. Operates tools and equipment according to prescribed safety procedures.
- ___ 18. Follows established safety procedures and techniques to perform job duties, including lifting, climbing and carrying.
- ___ 19. Corrects unsafe conditions in the work area and reports any conditions that are not correctable to the CTE Director immediately.
- ___ 20. Responds to after-hours emergencies as needed.

COMMENTS: _____

Other

- ___ 21. Transports a variety of item(s) (e.g. equipment, supplies, etc.) for the purpose of providing materials at job site or to bring equipment in for repairs.
- ___ 22. Provides technical and support services to all CTE programs and functions.
- ___ 23. Maintains confidentiality of information.
- ___ 24. Reports for work on time, dependable.
- ___ 25. Self-motivated, stays on task.

____ 26. Perform other duties assigned by CTE Director and/or Director of Technology.

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 (Print Name)

Date

Administrator's (Signature)

Date

Employee's Signature

Date