CLERK, PAYROLL Summative Appraisal Form

Name	Location	
Appraisal Period: From	_to Date of Review	
	Directions	
information, the evaluator estimat	ribe the employee who achieves success. Based on cumulative performance tes the employee's effectiveness in meeting each criterion. Rate each criterion using describes the employee's attainment of that criterion. For each domain, a commen ments 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	
1. Assists in preparation of reports for accuracy.	payroll by preparing time and attendance data. Balance all time and attendance	
2. Provides assistance to em	ployees regarding time and attendance.	
3. Maintains optimal level of procedures.	of accuracy for assigned work to ensure compliance with established policies and	
	direct deposit and time and attendance information. Prepares and updates c submission of child support payments.	
5. Tabulates and posts statis	tical or numerical data to records.	
6. Maintains files for all tim	e and attendance documents relating to payroll.	
7. Maintains confidentiality	of information.	
	s effort to improve operations, decrease turnaround times, streamline work peratively and jointly to provide quality seamless customer service.	
COMMENTS:		

Other	
9. Maintain confidentiality of information.	
10. Perform all other task and duties as assigned.	
COMMENTS:	
What strengths does possess?	
What are some improvements	can make to ensure a higher degree of success?
Summative Conference Comments:	
Recommendation of Evaluator: I have read and receinstrument. Renewal and/or Extension of AssignmentNon-renewal of AssignmentTermination of AssignmentNon-extension of Assignment	eived a copy of this evaluation. I have reviewed this
Administrator (Print Name)	Date
Administrator's Signature	Date
Employee's Signature	