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TO: Board of Trustees

FROM: Michelle DeLancey, Director of Accounting & HR

DATE: May 29, 2024

AGENDA ITEM TOPIC: Employee Evaluation Review form changes

Number of Supporting Documents: 02

Requested Action

• Motion to approve the Employee Evaluation Review form and to update the Administration Policy and Procedures manual section 3.8(a).

Background

 Attached is the current and proposed Employee Evaluation Review form that was presented at Strategic Planning. The changes that are being recommended are to the 'Performance Rating' section, 'Step Plan Recommendation' section, the footer, and to add the 'Job Description' section.

Employee Name: Job Title: Department: Review Period Date:	Last Review Date: Reviewer Name: Reviewer Title:	
	are to identify, discuss, and agree ee characteristics and/or behaviors to	on specific tasks, responsibilities, and career goals to improve to meet department goals.
Tasks & Res	sponsibilities	Manager's Summary
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
10)		
11)		
12)		
13)		
14)		
1		

Employee's	Goals for Upcomi	ng Year		Go	als Achieved	
1)			1)			
2)			2)			
3)			3)			
4)			4)			
5)			5)			
	Strengths			Areas that 1	Need Improvemen	nt
1)	J		1)		•	
2)			2)			
3)			3)			
4)			4)			
5)			5)			
Employee's Overall	Performance Ratir	ıg:	Department	Head Salar	y Step Plan Recon	nmendation:
Exceeds Expectations	Meets Expectations	Needs Improvement	Change	Implement	Department Head initials	Supervisor initials (A-Approve D-Deny)
			Remain at			
			Step increase			
				1	l	
Evaluating Supervi	sor	 Date		Employee		Date
D 1 A 1 2/7/20						D 2 -f

Employee Name: Job Title:	Last Review Date:					
Department: Review Period Date:	Reviewer Name: Reviewer Title:					
The employee & Supervisor are to identify, discuss, and agree on specific tasks, responsibilities, and career goals to accomplish, as well as employee characteristics and/or behaviors to improve to meet department goals.						
Tasks & Ro	esponsibilities	Manager's Summary				
1)						
2)						
3)						
4)						
5)						
6)						
7)						
8)						
9)						
10)						
11)						
12)						
13)						
14)						

Goals Achieved

Employee's Goals for Upcoming Year

1)	1)
2)	2)
3)	3)
4)	4)
5)	5)
Strengths	Areas that Need Improvement
1)	1)
2)	2)
3)	3)
4)	4)
5)	5)
Employee's Overall Performance Rating:	Department Head Salary Step Plan Recommendation:
Exceeds Expectations Meets Expectations Needs Improvement Unacceptab	Change Implement Department Head Supervisor initials (A-Approve D-Deny)
	No change*
Job Description:	Remain at current step
Accurate Revised**	Step increase
	Wage Increase**
Evaluating Supervisor Date	Employee Date

^{*}Employee will be placed within their current grade at the step closest to their current wage amount, but not below their current wage amount.

**Department Head to present to the Board of Trustees at Strategic Planning the revised job description and/or wage increase request. Denied requests will receive a step increase.

Board Approved XX/XX/XXXX

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