

Texas Department of Criminal Justice EMPLOYEE PERFORMANCE EVALUATION

PART I - ADMINISTRATIVE DATA		
01. DATE:	02. PERIOD OF REPORT: FROM: _____ TO: _____	03. REASON: <input type="checkbox"/> INTERIM <input type="checkbox"/> ANNUAL
EMPLOYEE	04. NAME: (Last, First, MI)	05. JOB TITLE: _____
	06. SSN:	07. UNIT/DEPARTMENT:
RATING SUPERVISOR	08. NAME: (First Line Supervisor)	09. JOB TITLE:
	10. SIGNATURE:	11. DATE:
SENIOR RATER	12. NAME: (Second Line Supervisor)	13. JOB TITLE:
	14. SIGNATURE:	15. DATE:
REVIEWER (If Applicable)	16. NAME: (Warden/Facility Administrator/Department Head/Designee)	17. JOB TITLE:
	18. SIGNATURE:	19. DATE:

PART II - PERFORMANCE ASSESSMENTS

A. Essential Functions: The rating supervisor has reviewed the essential functions and determined that all essential functions are aligned with the duties performed by this position. YES NO If no, follow procedures in PD-52, "Performance Evaluations," Section IV.B, Part II.A --Essential Functions.

1.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
2.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
3.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
4.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
5.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
6.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS
7.		<input type="checkbox"/> NEEDS MUCH IMPROVEMENT	<input type="checkbox"/> NEEDS SOME IMPROVEMENT	<input type="checkbox"/> MEETS STANDARDS	<input type="checkbox"/> SOMEWHAT EXCEEDS STANDARDS	<input type="checkbox"/> EXCEEDS STANDARDS

B. Standards of Conduct: Employee has adhered to expected standards of conduct, including the rules of conduct described in the Listing of Employee General Rules of Conduct and Disciplinary Violations identified in PD-22. YES NO
If no, identify the specific rule violation and disciplinary action imposed. Attach additional page if necessary.
COMMENTS:

C. TDCJ Safety Policy: Employee has adhered to TDCJ Safety Policy. YES NO
If no, identify specific safety policy deficiency and corrective action that has been taken. Attach additional page if necessary.
COMMENTS: (Rating Supervisor)

Employee Name: _____

SSN: _____

D. Fraud Risk Assessment (applies only to Salary Group B19 or C4 and above):

Proactively addresses the potential of fraud in the discharge of assigned duties. If no, identify deficiency and corrective action that has been taken.

YES NO

E. Supervisory Functions (if applicable):

1. Schedules employee's work and off duty time.

NEEDS MUCH IMPROVEMENT NEEDS SOME IMPROVEMENT MEETS STANDARDS SOMEWHAT EXCEEDS STANDARDS EXCEEDS STANDARDS

2. Provides training and instruction to subordinate employees.

NEEDS MUCH IMPROVEMENT NEEDS SOME IMPROVEMENT MEETS STANDARDS SOMEWHAT EXCEEDS STANDARDS EXCEEDS STANDARDS

3. Evaluates and counsels subordinate employees.

NEEDS MUCH IMPROVEMENT NEEDS SOME IMPROVEMENT MEETS STANDARDS SOMEWHAT EXCEEDS STANDARDS EXCEEDS STANDARDS

4. EEO Support: Adheres to TDCJ EEO Policy. If no, identify deficiency and corrective action that has been taken.

YES NO

PART III - PERFORMANCE DESCRIPTION

Needs much improvement - Does not meet standard requirements. All aspects of performance are poor. Corrective action is needed.

Needs some improvement - Inconsistently meets standard requirements, performance still needs improvement.

Meets standards - Meets standard requirements. Performance has been as expected of employees in same or related positions.

Somewhat exceeds standards - Always meets standard requirements. Performance exceeds that normally expected of employees in same or related positions.

Exceeds standards - Consistently meets and exceeds standard requirements. Performance is outstanding on a regular basis.

Written justification required for ratings of "Needs Much Improvement", "Needs Some Improvement" and "Exceeds Standards":

Employee may attach comments or provide comments within three workdays of performance evaluation review:

EMPLOYEE SIGNATURE (for Performance Evaluation): _____ DATE: _____

The employee's signature acknowledges receipt of this Employee Performance Evaluation form and does not indicate concurrence or non-concurrence with the performance assessments.

Note to Employee: With few exceptions, you are entitled upon request: (1) to be informed about the information the Agency collects about you; and (2) under Texas Government Code §§ 552.021 and 552.023, Texas Government Code, to receive and review the collected information. Under Texas Government Code § 559.004, you are also entitled to request, in accordance with the Agency's procedures, incorrect information the Agency has collected about you be corrected.

CONFIDENTIAL INFORMATION AGREEMENT

I understand that information concerning any person, system, or asset of the Texas Department of Criminal Justice that is obtained while performing my duties is to be held in strictest confidence and may not be disclosed except as required by job duties or law. I understand that computer system passwords I receive or devise are confidential. I will NOT disclose any password or post them where they may be viewed by others; this includes a co-worker, manager, supervisor, friend, partner, administrative assistant or others. The only exception to this rule is in the event an information technology specialist requires the password to resolve an access problem. Once the problem has been corrected I will immediately change my password. Use of a password not issued specifically to me or to a group of which I am a member is expressly prohibited. I am responsible for any computer transaction performed as a result of access authorized by use of my password. I agree to abide by all written conditions and restrictions imposed by the Information Security Manual. I agree further NOT to attempt to circumvent the computer security system by using or attempting to use, any transaction, hardware, software, files or resources I am not authorized to use. I understand that any copyrighted material, including but not limited to commercial software, which may be made available, is protected by copyright laws and is not to be copied for any reason without permission from the copyright owner. I understand that the violation of copyright laws, including those applicable to computer software, may result in fines and other legal action. I also understand that unauthorized access or use of the computer system of the Texas Department of Criminal Justice constitutes a "Breach of Computer Security" as defined under Chapter 33 of the Texas Penal Code, and may be a criminal offense under Texas Penal Code, § 33.02.

EMPLOYEE SIGNATURE: _____ DATE: _____