

SCHOOL DISTRICT OF GADSDEN COUNTY
SERVICE DEFINITIONS AND DATA COLLECTION FORM

OFFICE MANAGER

1. SERVICE DELIVERY

- _____ 1. Assign duties and supervise work of clerical office personnel.
- _____ 2. Assume responsibility for payroll.
- _____ 3. Keep internal accounts.
- _____ 4. Maintain confidential files.
- _____ 5. Perform bookkeeping tasks.
- _____ 6. Act as personal secretary to the Principal.
- _____ 7. Assist with telephones, intercom, and teachers / staff.

2. EMPLOYEE QUALITIES / RESPONSIBILITIES

- _____ 8. Report to work punctually and regularly.
- _____ 9. Cooperate with students, parents, and peers.
- _____ 10. Exhibit a positive attitude while working with all employees.
- _____ 11. Solve problems.

3. SYSTEM SUPPORT

- _____ 12. Assist the school and District in establishing and maintaining good public relations.
- _____ 13. Attend faculty meetings and take minutes.
- _____ 14. Direct students and call parents as necessary.
- _____ 15. Gather and organize pertinent data as needed and put in usable form.
- _____ 16. Perform data entry tasks as needed.
- _____ 17. Perform other duties as assigned.

4. WORKSITE SERVICE STANDARDS

INDICATORS

- _____ 18. Student growth and achievement, the work ethic, fostering and developing professional image, collaboration and affirmative networking, systemic and systematic preparation for function delivery, interpersonal interaction, teammanship and communication skills, translating organizational purpose into observable behavior and others.
- _____ 19. _____
- _____ 20. _____
- _____ 21. _____
- _____ 22. _____

5. ASSESSMENT AND OTHER SERVICES

- _____ 23. The use of the adopted performance appraisal systems for instructional and other employees.
- _____ 24. The accurate and timely filing of all school reports.
- _____ 25. The completion of required professional development services.

OFFICE MANAGER (Continued)

_____ 26. _____
_____ 27. _____

DATA COLLECTION CODES

O -- Observed
C -- Collected Data

I -- Clearly Indicated
NE -- Not Evident

INTERACTION DATES

Formal Observations

Informal Observations

_____ (Date)
_____ (Date)
_____ (Date)

_____ (Date)
_____ (Date)
_____ (Date)

_____ (Signature of Evaluator / Date)