

**SCHOOL DISTRICT OF GADSDEN COUNTY**

**PLUMBER**

PERFORMANCE APPRAISAL

Name \_\_\_\_\_ Position \_\_\_\_\_

School / Dept. \_\_\_\_\_ School Year \_\_\_\_\_

**1. SERVICE DELIVERY**

**Category Definitions**

1. Repair water lines and leaking faucets.
2. Unclog sewer lines and commodes.
3. Develop and maintain a preventive program.
4. Install, maintain, and repair gas lines and equipment.
5. Complete work orders initiated at the building level.
6. Order and bid, if necessary, plumbing parts.
7. Maintain an inventory of parts and materials.
8. Work with other tradesmen as needed.

**Source Code** (circle choices)

- |                               |                         |                           |   |                       |                          |
|-------------------------------|-------------------------|---------------------------|---|-----------------------|--------------------------|
| A. Behavioral Event Interview | B. Direct Documentation | C. Indirect Documentation | D. Training Programs Competency Acquisition | E. Evaluatee Provided | F. Confirmed Observation |
|-------------------------------|-------------------------|---------------------------|---|-----------------------|--------------------------|

**Rating Code** (circle one)

- |                |                   |           |                |             |
|----------------|-------------------|-----------|----------------|-------------|
| Unsatisfactory | Needs Improvement | Effective | Very Effective | Outstanding |
|----------------|-------------------|-----------|----------------|-------------|

**PLUMBER (Continued)**

**2. EMPLOYEE QUALITIES / RESPONSIBILITIES**

**Category Definitions**

- 9. Work independently or as a team member.
- 10. Interact with school and maintenance personnel.
- 11. Report to work punctually and regularly.
- 12. Display an appropriate work ethic.
- 13. Follow maintenance policies and procedures.

**Source Code** (circle choices)

- |                                      |                                |                                  |  |                              |                                 |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|
| <b>A. Behavioral Event Interview</b> | <b>B. Direct Documentation</b> | <b>C. Indirect Documentation</b> | <b>D. Training Programs Competency Acquisition</b> | <b>E. Evaluatee Provided</b> | <b>F. Confirmed Observation</b> |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|

**Rating Code** (circle one)

- |                       |                          |                  |                       |                    |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|
| <b>Unsatisfactory</b> | <b>Needs Improvement</b> | <b>Effective</b> | <b>Very Effective</b> | <b>Outstanding</b> |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|

**3. SYSTEM SUPPORT**

**Category Definitions**

- 14. Communicate well with Director of Facilities.
- 15. Maintain a positive relationship with outside vendors.
- 16. Represent the District in an appropriate manner.
- 17. Perform other duties as assigned.

**Source Code** (circle choices)

- |                                      |                                |                                  |  |                              |                                 |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|
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|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|

**Rating Code** (circle one)

- |                       |                          |                  |                       |                    |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|
| <b>Unsatisfactory</b> | <b>Needs Improvement</b> | <b>Effective</b> | <b>Very Effective</b> | <b>Outstanding</b> |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|

**PLUMBER (Continued)**

**4. WORKSITE SERVICE STANDARDS**

**Control Dimension**

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, teamsmanship and communication skills, translating organizational purpose into observable behavior and others.

(Special Note)

**An effective or higher rating is required in this job context category in order to be eligible for an overall effective or higher rating.**

**Source Code** (circle choices)

- |                                      |                                |                                  |  |                              |                                 |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|
| <b>A. Behavioral Event Interview</b> | <b>B. Direct Documentation</b> | <b>C. Indirect Documentation</b> | <b>D. Training Programs Competency Acquisition</b> | <b>E. Evaluatee Provided</b> | <b>F. Confirmed Observation</b> |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|

**Rating Code** (circle one)

- |                       |                          |                  |                       |                    |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|
| <b>Unsatisfactory</b> | <b>Needs Improvement</b> | <b>Effective</b> | <b>Very Effective</b> | <b>Outstanding</b> |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|

**5. ASSESSMENT AND OTHER SERVICES**

**Control Dimension**

The use of the adopted performance appraisal system for instructional and other employees.  
The accurate and timely filing of all school reports.  
The completion of required professional development services.

(Special Note)

**An effective or higher rating is required in this job context category in order to be eligible for an overall Effective or higher rating.**

**Source Code** (circle choices)

- |                                      |                                |                                  |  |                              |                                 |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|
| <b>A. Behavioral Event Interview</b> | <b>B. Direct Documentation</b> | <b>C. Indirect Documentation</b> | <b>D. Training Programs Competency Acquisition</b> | <b>E. Evaluatee Provided</b> | <b>F. Confirmed Observation</b> |
|--------------------------------------|--------------------------------|----------------------------------|--|------------------------------|---------------------------------|

**Rating Code** (circle one)

- |                       |                          |                  |                       |                    |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|
| <b>Unsatisfactory</b> | <b>Needs Improvement</b> | <b>Effective</b> | <b>Very Effective</b> | <b>Outstanding</b> |
|-----------------------|--------------------------|------------------|-----------------------|--------------------|

**PLUMBER (Continued)**

**OVERALL RATING: (enter total scores)**

Input from parents and teachers was collected and analyzed in preparation of this report.

Unsatisfactory \_\_\_\_\_ Needs Improvement \_\_\_\_\_ Effective \_\_\_\_\_ Very Effective \_\_\_\_\_ Outstanding \_\_\_\_\_

**Comments of the Evaluatee:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This evaluation has been discussed with me: Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
**Signature of Evaluatee** **Date**

**Comments of the Evaluator:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature of Evaluator** **Date**