

Date _____

COLLEGE LABORATORY TECHNICIAN
ANNUAL EVALUATION REPORT

Covering the period from September, 20____ to June, 20____

Department _____

Name of observee _____ Rank _____
Last Name, First Name

Name of observer _____ Rank _____
Last Name, First Name

PLEASE TYPE OR PRINT CLEARLY. ATTACH AN APPROPRIATE JOB DESCRIPTION (additional sheets to be used if necessary; supporting documents should be attached)

1. Strengths and/or Weakness in Job Performance (be specific):

2. Relationships in Working with Others:

3. Professional Development:

4. Service to College or Community (if appropriate):

5. Recommendation for Improvement (be specific):

6. Evaluation Rating:

Excellent_____

Very Good_____

Satisfactory_____

Conditional_____
(to be used in first year only)

Unsatisfactory_____

I have read and been given a copy of a the above report and so signify by my signature. I understand that I may attach additional comments to this document.

Signature of staff member

date

Signature of observer

date

Department chair/designee
1/04

date