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 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                     date

1/04

Page 2 of 2