



## Member Performance Evaluation Form

Evaluation #1

Evaluation #2

**MEMBER NAME:** \_\_\_\_\_

**SPONSORING ORGANIZATION:** \_\_\_\_\_

**SERVICE SITE:** \_\_\_\_\_

**DATE OF EVALUATION REVIEW:** \_\_\_\_\_

**EXCELLENT** – Member’s performance consistently exceeds the expectations of the position.

**GOOD** – Member’s performance meets the expectations of the position.

**SATISFACTORY** – Member’s performance is adequate and indicative of the bare minimum.

**NEEDS IMPROVEMENT** – Member’s performance is less than expected and needs improvement.

**UNSATISFACTORY** – Member’s performance is substantially weak and below the requirements of the position.

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory
<b>1. Professionalism</b>					
Dresses appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sets priorities and anticipates site’s needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles constructive criticism well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows policies, procedures and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependable/can be counted on to carry out duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays overall positive demeanor and attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits good character and role model qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a service ethic that is indicative of AmeriCorps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory
<b>2. Communication</b>					
Effectively and professionally expresses ideas and thoughts verbally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively and professionally expresses ideas and thoughts in written form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits good listening and comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Selects and uses appropriate, respectful communication methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory
<b>3. Initiative</b>					
Undertakes personal development activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeks increased responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Looks for and takes advantage of opportunities to learn and serve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asks for help when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory
<b>4. Reliability</b>					
Responds to requests for service and assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follow instructions, responds to supervisor direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes responsibility for own actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attends all required training sessions and weekly meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fills out and submits all relevant paperwork in a timely manner, including timesheets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory
<b>5. Adaptability</b>					
Adapts to changes in the service environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manages competing demands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Changes approach or methods to best fit the situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

**6. Comment on any outstanding abilities/characteristics the member has brought to their position.**

**7. Comment on areas where improvement is desirable or necessary.**

**STATUS OF SERVICE HOURS:** Is the member making satisfactory progress toward achieving the required number of service hours?  Yes  No

If **no**, a plan for successful completion of hours needs to be documented and on file.

	Excellent	Good	Satisfactory	Unsatisfactory
<b>Overall Performance Status:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**MEMBER REMARKS:**

\_\_\_\_\_  
Primary or Secondary Project Site Staff Signature

\_\_\_\_\_  
Date

By signing below, I confirm that I have reviewed and received a copy of this evaluation:

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date