

BCPUD Employee Self-Evaluation (Form #1)

Prior to your 1-on-1 Employee Evaluation meeting with the General Manager, please fill out the Employee Self-Evaluation (Form #1). In tandem, the General Manager will fill out the Employee Evaluation by the General Manager (Form #2). Both Form #1 and #2 will be included in your Personnel Folder and will not be seen by anyone besides the General Manager. Please return this form directly to the General Manager in the manila envelope provided. You will have a separate opportunity to provide feedback regarding the performance of your Direct Supervisor (Form #3), and the General Manager, the Board, and the District (Form #4).

Employee Name: _____

Position: _____

Date: _____

Completed by: Employee

Return to: Employee/Personnel Folder

Part 1: Employee Self-Evaluation

Please complete this section before your evaluation meeting. Use the scale below to rate yourself on each item:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Arrives to work on time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attends to assigned tasks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communicates effectively with coworkers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Follows safety protocols / procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates initiative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Uses time efficiently | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Keeps workspace and tools organized | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | 1 | 2 | 3 | 4 | 5 |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Willingness to learn / adapt | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall job performance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Reflections

What accomplishments or contributions are you most proud of this year?

What challenges have you faced, and how did you handle them?

What support, training, or resources would help you do your job better?

BCPUD Employee Self-Evaluation (Form #1)

Prior to your 1-on-1 Employee Evaluation meeting with the General Manager, please fill out the Employee Self-Evaluation (Form #1). In tandem, the General Manager will fill out the Employee Evaluation by the General Manager (Form #2). Both Form #1 and #2 will be included in your Personnel Folder and will not be seen by anyone besides the General Manager. Please return this form directly to the General Manager in the manila envelope provided. You will have a separate opportunity to provide feedback regarding the performance of your Direct Supervisor (Form #3), and the General Manager, the Board, and the District (Form #4).

Employee Name: _____

Position: _____

Date: _____

Completed by: Employee

Return to: Employee/Personnel Folder

Part 1: Employee Self-Evaluation

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| Arrives to work on time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attends to assigned tasks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communicates effectively with coworkers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Follows safety protocols / procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates initiative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Uses time efficiently | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Keeps workspace and tools organized | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | 1 | 2 | 3 | 4 | 5 |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Willingness to learn / adapt | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall job performance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Reflections

What accomplishments or contributions are you most proud of this year?

What challenges have you faced, and how did you handle them?

What support, training, or resources would help you do your job better?

BCPUD Employee Evaluation by the General Manager (Form #2)

Prior to your 1-on-1 Employee Evaluation meeting with the General Manager, the General Manager will fill out this Employee Evaluation by the General Manager (Form #2). Form #2 will be included in your Personnel Folder and will not be seen by anyone besides the General Manager. You will have a separate opportunity to provide feedback regarding the performance of your Direct Supervisor (Form #3), and the General Manager, the Board, and the District (Form #4).

Employee Name: _____

Position: _____

Date: _____

Completed By: General Manager

Returned to: Employee/Personnel File

Part 2: General Manager's Evaluation of the Employee

Please complete this section before your evaluation meeting. Use the scale below to rate the employee on each item:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Arrives to work on time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attends to assigned tasks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communicates effectively with coworkers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Follows safety protocols / procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates initiative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Uses time efficiently | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Keeps workspace and tools organized | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Willingness to learn / adapt | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall job performance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Reflections

1. Performance Highlights

What has this employee done well?

2. Areas for Growth or Improvement

Where could they improve or develop further?

3. Teamwork & Communication

How do they interact with others? Are they reliable and collaborative?

4. Initiative & Problem-Solving

Do they take initiative? How do they handle unexpected issues?

5. Goals or Focus Areas for the Next Period

What should they work on or aim for?

BCPUD Employee Feedback Regarding their Direct Supervisor (Form #3)

Prior to your 1-on-1 Employee Evaluation meeting with the General Manager, please fill out Employee Feedback Regarding their Direct Supervisor (Form #3). This feedback will be discussed during your Employee Evaluation meeting with the General Manager, as it is important to understand how your work environment is being impacted by your Direct Supervisor. This information will only be viewed by the General Manager and will not be directly shared with your Direct Supervisor or included in your Personnel File. Please return this form directly to the General Manager in the manila envelope provided. You will have a separate opportunity to provide feedback regarding the performance of the General Manager, the Board, and the District (Form #4).

Employee Name: _____

Position: _____

Date: _____

Completed By: Employee

Return to: General Manager

Part 3: Employee Feedback Regarding Your Direct Supervisor

If you have a Direct Supervisor who is not the GM, use the scale below to rate your Direct Supervisor on each item:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Communicates expectations and responsibilities clearly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Provides timely and constructive feedback. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Treats staff with fairness and respect. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is available and responsive when support or clarification is needed. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Understands the work I do and the challenges I face. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | 1 | 2 | 3 | 4 | 5 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Encourages a positive and collaborative work environment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Follows through on commitments; communicates changes effectively. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Open Comments

1. How would you describe your working relationship with your supervisor?

Consider communication, fairness, support, and clarity of expectations.

2. What is your supervisor doing well?

3. What could your supervisor do differently to better support you?

BCPUD Organizational Feedback from Employee (Form #4)

The Organizational Feedback from Employee (Form #4) is separate from your individual performance evaluation. It is intended to give you a voice in evaluating the leadership and support systems of the District. This information will also be used by the Board to help them evaluate the job performance of the General Manager. Only the Board of Directors will see your answers to these questions; the General Manager will not see your answers. Please return this form directly to the Assistant General Manager in the manila envelope provided.

Employee Name: _____

Position: _____

Date: _____

Completed By: Employee

Returned to: Board of Directors

Section 1: Employee Feedback on the General Manager

Use the scale below to rate the General Manager on each item:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Communicates clearly and consistently with staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates transparency and fairness in decision-making. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is accessible and responsive when staff need support or clarification. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Provides clear direction and leadership for the organization. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Supports a positive and respectful workplace culture. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Understands the operational needs of the District and its employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Follows through on commitments and communicates changes effectively. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Open Comments

1. **What is working well in the General Manager's leadership?**

Consider communication, responsiveness, support, and overall direction.

2. **Are there areas where the General Manager could improve?**

This could include clarity, availability, decision-making, etc.

3. **Do you feel the General Manager understands and supports your work?**

☐ Yes ☐ Somewhat ☐ No

Optional comments:

Section 2: Employee Feedback on The Board and the District as a Whole

Use the scale below to rate the Board of Directors and the District:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| The District provides the tools, equipment, and resources needed to do my job effectively. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The District communicates priorities and decisions clearly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The District supports a safe and respectful work environment. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Board demonstrates awareness of operational and staffing needs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The Board and District leadership are responsive to employee concerns. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The District effectively addresses infrastructure and community service needs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I feel valued and respected as an employee of the District. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Open Comments

1. What is the District doing well in terms of supporting staff and operations?

2. What could the Board or District leadership do better?

3. Any other feedback you'd like to share?

Do you feel the District (Board and leadership) is responsive to staff needs?

☐ Yes ☐ Sometimes ☐ No

Optional comments:

Do you feel the District is effectively addressing community and infrastructure needs?

☐ Yes ☐ Sometimes ☐ No

Optional comments:

What could the Board or District leadership do to better support employees and operations?

Think about resources, policies, communication, or culture.

BCPUD General Manager Evaluation (Form #5)

The General Manager Evaluation (Form #5) is intended for use by BCPUD Board Members to evaluate the performance of the General Manager. Your feedback will help guide professional development, clarify expectations, and support effective leadership. During the evaluation process of the General Manager, the Board should also consider information gathered in the Organizational Feedback From Employees (Form #4). Please return this form to the Board of Directors in the manila envelope provided.

Board Member Name: _____

Date: _____

Completed By: Board Member

Returned to: General Manager/Personnel Folder

Section 3: Board Evaluation of the General Manager

Use the scale below to rate the General Manager on each item:

1 = Never/Rarely

2 = Inconsistent

3 = Meets Expectations

4 = Above Expectations

5 = Excellent / Consistently Exceeds

| | 1 | 2 | 3 | 4 | 5 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Communicates effectively with the Board and staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates transparency and integrity in decision-making. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Provides clear leadership and direction for the District. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Effectively manages District operations and staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Understands and addresses infrastructure and community needs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Responds appropriately to emerging issues and challenges. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintains positive relationships with the public and partner agencies. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Keeps the Board informed and provides timely, relevant information. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates fiscal responsibility and sound financial oversight. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

BCPUD General Manager Evaluation (Form #5)

| | 1 | 2 | 3 | 4 | 5 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Supports a healthy, respectful, and productive workplace culture. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

BCPUD General Manager Evaluation (Form #5)

Open Feedback

What are the General Manager's key strengths?

Consider leadership style, communication, problem-solving, etc.

What areas could the General Manager improve or develop further?

Consider strategic planning, delegation, responsiveness, etc.

Are there specific goals or priorities you would like the General Manager to focus on in the coming year?
