

NON-TEACHING INSTRUCTIONAL STAFF

(College Laboratory Technician)

NAME _____

DEPARTMENT _____

TITLE _____

DATE OF EVALUATION _____

ANNUAL EVALUATION

OTHER

DESCRIPTION OF DUTIES:

A. Learning Reinforcement

B. Administrative

C. Supervision (where applicable)

D. Technical Responsibilities

1. Performance of Duties: (Please refer specifically to the duties on page one.)

2. Progress since previous Evaluation:

3. Interpersonal Relations (Include Faculty, peers and users of Laboratory services.)

4. Ability to supervise other Laboratory Personnel. (If applicable)

5. Special Contribution to Department/College:

6. GOALS for the year:

7. PROFESSIONAL GROWTH:

8. DISCUSSION OF THE EVALUATION (Additional comments by employee or supervisor.)

It is my intention that this Evaluation be considered (CHECK ONE)

Satisfactory

Unsatisfactory

Chair/Supervisor Signature_____

DATE_____ **TITLE**_____

I have seen this Evaluation and have no statement to make.

I have seen this Evaluation and have a statement to make.

Date_____ **Signature of Employee**_____

Incumbent declines to sign.