

SECONDARY SOURCE

PROFESSIONAL EMPLOYEE EVALUATION QUESTIONNAIRE

STATE UNIVERSITY OF NEW YORK COLLEGE AT CORTLAND

TO: _____

FROM: _____

DATE: _____

_____ is a professional employee at the SUNY at Cortland. He/she is performing the responsibilities of _____. You have been identified as one who had a functional relationship with this professional employee during the period of _____ to _____. To assist us in evaluating his/her performance, please respond to the competencies below and/or provide a narrative summary of the quality of service that you have received.

Please mark the response that best describes your working relationship to this person.

- a. Little or infrequent direct interaction and/or use of services.
- b. Some direct interaction and/or use of services.
- c. Frequent or daily interaction and/or use of services.

The employee will be rated on a scale of 1 (unsatisfactory) to 5 (outstanding). A description for each rating is provided below. Please take careful consideration when assessing the employee's performance.

- 1- *Unsatisfactory:* employee does not meet minimum job requirements
- 2- *Marginal:* employee meets some job requirements, but improvement is necessary
- 3- *Good:* employee effectively meets all job requirements
- 4- *Excellent:* employee meets and often exceeds job requirements
- 5- *Outstanding:* employee consistently exceeds job requirements
- N/A *Not Applicable*

The employee will be rated on a scale of 1 (unsatisfactory) to 5 (outstanding) and N/A if an area is not applicable. Please take careful consideration when assessing the employee's performance.

Initiative and Flexibility (The degree of skill in adjusting to changing conditions and needs.)

- 1 2 3 4 5 N/A

Communication (The individual effectively conveys what he/she needs and expects from others to complete tasks.)

- 1 2 3 4 5 N/A

Leadership (May demonstrate necessary skills to be a leader; his/her opinions and contributions are highly respected; others seek his/her advice.)

- 1 2 3 4 5 N/A

Creativity (Ability to execute responsibilities and approach problems in new, innovative, and original ways.)

- 1 2 3 4 5 N/A

Job Knowledge (The extent to which the individual is current and accurate in knowledge and practices related to responsibilities of his/her position.)

- 1 2 3 4 5 N/A

Quality of Work (The extent to which the individual's work is accurate, thorough, consistent, clear, and of high merit.)

- 1 2 3 4 5 N/A

Planning and Organization (Ability to plan work, set priorities and goals, and meet deadlines.)

- 1 2 3 4 5 N/A

Dependability (Ability to trust the individual with duties expected of him/her; is a reliable source of information, responds to messages, inquiries, etc.)

1 2 3 4 5 N/A

Narrative (bulleted) Summary (optional):

Commendable interactions or areas of strength:

Areas you feel need improvement:

Your evaluative comments will be summarized. Are you willing to have your name and specific comments released to the employee if she/he requests them?

Yes No

SIGNATURE

DATE

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WITHIN 10 WORKING DAYS.