# SCHOOL DISTRICT OF GADSDEN COUNTY

**VEHICLE MECHANIC II** 

PERFORMANCE APPRAISAL
Name \_\_\_\_\_ Position \_\_\_\_\_
School / Dept. \_\_\_\_\_ School Year\_\_\_\_\_

## 1. SERVICE DELIVERY

#### **Category Definitions** 1. Provide safety inspections on all School Board vehicles. 2. Perform repairs and maintenance on vehicles as specified on work orders. 3. Provide diagnosis and repair on reported problems. 4. Provide preventive maintenance on vehicles as an ongoing plan. 5. Repair and overhaul brakes, transmissions, differentials, front and rear axle assemblies and hydraulics. 6. Perform emergency road repairs and test-drive vehicles to ensure they are in safe operating condition. 7. Maintain tools and equipment in good working order. Source Code (circle choices) A. **Behavioral Event** B. Direct C. Indirect Training E. Evaluatee Confirmed D. F. Provided Interview Documentation Documentation Programs Observation Competency Acquisition Rating Code (circle one) Unsatisfactory Effective **Very Effective** Outstanding **Needs Improvement**

# **VEHICLE MECHANIC II (Continued)**

## 2. EMPLOYEE QUALITIES / RESPONSIBILITIES

					Categor	y Defir	nitions				
9. 10. 11.	<ol> <li>8. Work independently or as a team member.</li> <li>9. Interact with related personnel.</li> <li>10. Report to work punctually and regularly.</li> <li>11. Display an appropriate work ethic.</li> <li>12. Follow maintenance policies and procedures.</li> </ol>										
So	Source Code (circle choices)										
A.	Behavioral Event Interview	B.	Direct Documentation	C.	Indirect Documentation	D.	Training Programs Competency Acquisition	E.	Evaluatee Provided	F.	Confirmed Observation
Ra	ting Code (circle one) Unsatisfactory		Needs Im	prove	nent	Effec	tive	Very	Effective		Outstanding

## 3. SYSTEM SUPPORT

Category Definitions							
<ol> <li>Communicate well with Supervisor.</li> <li>Represent the School Board in a positive manner.</li> <li>Perform other duties as assigned.</li> </ol>							
Source Code (circle choices)							
A. Behavioral Event B. Direct C. Indirect Interview Documentation Documentation	D. Training Programs Competency Acquisition	E. Evaluatee Provided	F. Confirmed Observation				
Rating Code (circle one)							
Unsatisfactory Needs Improvement	Effective	Very Effective	Outstanding				

## **VEHICLE MECHANIC II (Continued)**

4. WORKSITE SERVICE STANDARDS

#### **Control Dimension** Student growth and achievement, the work ethic, fostering and developing professional image, collaboration and affirmative networking, systemic and systematic preparation for function delivery, interpersonal interaction, teamsmanship and communication skills, translating organizational purpose into observable behavior and others. (Special Note) An effective or higher rating is required in this job context category in order to be eligible for an overall effective or higher rating. Source Code (circle choices) Training **Behavioral Event** B. Direct C. Indirect D. E. Evaluatee F. Confirmed A. Interview Documentation Documentation Programs Provided Observation Competency Acquisition Rating Code (circle one) Effective Very Effective Outstanding Unsatisfactory **Needs Improvement**

### 5. ASSESSMENT AND OTHER SERVICES

	Control Dimension										
Th	The use of the adopted performance appraisal system for instructional and other employees. The accurate and timely filing of all school reports. The completion of required professional development services.										
	(Special Note) An effective or higher rating is required in this job context category in order to be eligible for an overall Effective or higher rating.										
50 А.	urce Code (circle choice Behavioral Event Interview	B.	Direct Documentation	C.	Indirect Documentation	D.	Training Programs Competency Acquisition	E.	Evaluatee Provided	F.	Confirmed Observation
Ra	ting Code (circle one) Unsatisfactory		Needs Impro	veme	nt Ef	fectiv	2	Very Ef	ffective	0	utstanding

# **VEHICLE MECHANIC II (Continued)**

OVERALL RATING: (enter total scores)									
Input from parents and teachers was collected and analyzed in preparation of this report.									
Unsatisfactory	Needs Improvement	_ Effective _	Very Effective	Outstanding					
Comments of the Evaluated	e:		This evaluation has been discussed w	with me: Yes No					
			Signature of Evaluatee	Date					
Comments of the Evaluator	r:								
			Signature of Evaluator	Date					