|  |  |  |
| --- | --- | --- |
| Date of Evaluation | Election on WhichEvaluation is Based | Person Conducting Evaluation |
|  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

name of officer home telephone number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

resident address business telephone number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

city/town zip assigned precinct

 chief officer  assistant chief officer  officer

 date of original appointment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Performance Requirement** | **N/A** | **0** | **+1** | **+2** | **+3** |
| Attends training session |  |  |  |  |  |
| Follows established procedures  |  |  |  |  |  |
| Reports to the polls on time  |  |  |  |  |  |
| Deals effectively with voters |  |  |  |  |  |
| Works well with other officers |  |  |  |  |  |
| Contacts General Registrar or electoral board as needed |  |  |  |  |  |
| demonstrates knowledge of equipment used in the polling place. |  |  |  |  |  |
|  Demonstrates proficiency in assigned tasks |  |  |  |  |  |
|  Accurately completes tasks and paperwork |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  **Total each column** |  |  |  |  |  |

N/A = Not applicable 0 = needs improvement +1 = Fair +2 = Good +3 = Excellent

**Please use reverse side of form for comments or to note need for additional training.**

Signature of Officer: Date:

Signature of Person Completing the Evaluation Form: Date: