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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Frontline Worker Performance Appraisal** | | | | | | | | |
| Name: | | Position: | Facility: | | | | | |
| Employee Start Date: | | Date of Appraisal: | Department: | | | | | |
|  | | | | | | | | |
| 5-Exceptional | Performance is consistently superior and significantly exceeds position requirements | | 5-Exceptional | 4-Highly Effective | 3-Proficient | 2-Inconsistent | 1-Unsatisfactory | N/A-Not Applicable |
| 4-Highly Effective | Performance frequently exceeds position requirements | |
| 3-Proficient | Performance consistently meets position requirements | |
| 2-Inconsistent | Performance meets some, but not all position requirements | |
| 1-Unsatisfactory | Performance consistently fails to meet minimum position requirements; employee lacks skills required or fails to utilize necessary skills | |
| N/A-Not Applicable | Employee has not been in position long enough to have demonstrated the essential elements of the position and will be reviewed at a later agreed upon date OR employee does not engage in the task as part of his or her duties | |
| **Safety** | | | | | | | | |
| Places safety of self, others, property, equipment, vehicles as a top priority | | |  |  |  |  |  |  |
| Follows established safety policies and safe work practices | | |  |  |  |  |  |  |
| Participates positively in the safety program: involved in inspections when expected, reports safety concerns, etc | | |  |  |  |  |  |  |
| Wears appropriate personal protective equipment | | |  |  |  |  |  |  |
| Has the appropriate level of knowledge of all organizational safety topics: WHMIS, Musculoskeletal Injury Prevention, Emergency Procedures, First Aid, etc | | |  |  |  |  |  |  |
| Follows procedures regarding emergency response | | |  |  |  |  |  |  |
| Can identify the location of safety equipment | | |  |  |  |  |  |  |
| **Safety Comments** | | | | | | | | |