

**CLERK, ACCOUNTS PAYABLE TRAVEL
Summative Appraisal Form**

Name _____ Location _____

Appraisal Period: From _____ to _____ Date of Review _____

Directions

The following statements describe the employee who achieves success. Based on cumulative performance information, the evaluator estimates the employee's effectiveness in meeting each criterion. Rate each criterion using the scale below that most closely describes the employee's attainment of that criterion. For each domain, a comment area is provided for general statements and/or recommendations.

Rating Scale

- | | | |
|----------|------------------------------|--|
| 5 | Clearly Outstanding: | Performance is consistently far superior to what is normally expected. |
| 4 | Exceeds Expectations: | Performance demonstrates increased proficiency and is consistently above expectations. |
| 3 | Meets Expectations: | Performance meets expectations and presents no significant problems. |
| 2 | Below Expectations: | Performance is consistently below expectations and significant problems exist |
| 1 | Unsatisfactory: | Performance is consistently unacceptable. |
| 0 | Not Applicable | |

JOB PERFORMANCE STATEMENTS

Travel

- ___ 1. Receive and process for payment all travel accounts payable invoices, requisitions, purchase orders, etc. Match invoices with proper purchase orders; ensure completeness and accuracy of invoices. Verify meal allowances, registrations hotel rates, etc. Detect and resolve problems with incorrect orders, invoices, and shipments. Contact district personnel and vendors to correct or obtain information needed. Confirm balances in accounts for all requisitions. Prepare and distribute paid invoices at designated times. Communicate with campus staff the current status of invoices if inquired.
- ___ 2. Prepare travel related deposits and data sheets.

Accounting

- ___ 3. Receive and process for payment all travel accounts payable invoices, requisitions, purchase orders, etc. Match invoices with proper purchase orders; ensure completeness and accuracy of invoices. Verify meal allowances, registrations hotel rates, etc. Detect and resolve problems with incorrect orders, invoices, and shipments. Contact district personnel and vendors to correct or obtain information needed. Confirm balances in accounts for all requisitions. Prepare and distribute paid invoices at designated times. Communicate with campus staff the current status of invoices if inquired. Maintain responsibility for accuracy and completeness of accounts payable and updating in the financial general ledger.
- ___ 4. Assume responsibility for the verification of vendor name, address and amounts to the attached invoice(s) before processing for payment. Reconcile vendor statements for payment accuracy. Research and communicate unpaid invoices, credit memos and back ordered items.

General Duties

- ___ 5. Assume responsibility for maintaining the paperwork log to obtain signatures on the paperwork/purchase orders released to individuals. Assume responsibility for the distribution of accounts payable checks.
- ___ 6. Develop and maintain appropriate financial records (file office copies of checks, requisitions, invoices, and purchase orders) for the purpose of ensuring the availability of documentation and compliance with established policies and regulatory guidelines.

COMMENTS: _____

Other

- ___ 7. Receive incoming calls, answer questions, and direct calls to the proper party.
- ___ 8. Keep informed of and comply with state and district policies and regulations concerning primary job functions.
- ___ 9. Perform other duties as assigned by supervisor.
- ___ 10. Ensure the confidentiality and security of all financial files.
- ___ 11. Demonstrate a positive and professional interpersonal relations with district personnel and outside agencies.

COMMENTS: _____

What strengths does _____ possess?

What are some improvements _____ can make to ensure a higher degree of success?

Summative Conference Comments:

Recommendation of Evaluator: I have read and received a copy of this evaluation. I have reviewed this instrument.

Renewal and/or Extension of Assignment

Non-renewal of Assignment

Termination of Assignment

Non-extension of Assignment

Administrator (Print Name) Date

Administrator's Signature Date

Employee's Signature Date