

**COMPUTER TECHNICIAN  
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**

**Installation**

- \_\_\_\_1. Installs and upgrades computers and peripherals throughout the district.
- \_\_\_\_2. Installs network cabling and network peripherals throughout the district.
- \_\_\_\_3. Relocates computer hardware, peripherals, and equipment as needed.
- \_\_\_\_4. Installs and configures software as needed.
- \_\_\_\_5. Assists with the installation, maintenance, troubleshooting, and repair of data communications circuits and equipment.

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_

**Equipment Repair and Maintenance**

- \_\_\_\_6. Diagnoses and repairs equipment, including printers, terminals, and personal computers.
- \_\_\_\_7. Services equipment according to established preventive maintenance schedule.

- \_\_\_\_8. Maintains accurate updated records of preventive maintenance.
- \_\_\_\_9. Maintains accurate records of time and materials required to perform repairs and service.

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

**Safety**

- \_\_\_\_10. Operates tools and equipment according to prescribed safety procedures.
- \_\_\_\_11. Follows established safety procedures and techniques to perform job duties, including lifting, climbing and carrying.
- \_\_\_\_12. Corrects unsafe conditions in the work area and reports any conditions that are not correctable to the supervisor immediately.
- \_\_\_\_13. Responds to after-hours emergencies as needed.

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

**Other**

- \_\_\_\_14. Performs other duties assigned by supervisor.
- \_\_\_\_15. Maintains confidentiality of information.
- \_\_\_\_16. Reports for work on time, dependable
- \_\_\_\_17. Self-motivated, stays on task

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

What strengths does \_\_\_\_\_ possess?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are some improvements \_\_\_\_\_ can make to ensure a higher degree of success for students on this campus/department?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Summative Conference Comments:

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**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 (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date