

WIC OPERATIONS MANAGER

Employee _____

Supervisor _____

Date _____ to _____

Unacceptable	Marginal Performance	Competent Performance	Commendable Performance	Distinguished
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COMMENTS

SKILLS

A. Skills & knowledge necessary for job						
B. Interest in and time spent on improving skills and knowledge						

QUALITY OF PERFORMANCE

A. Quality of work done						
1. Implement and monitor compliance with policies and procedures and regulations.						
2. Record keeping						
3. Program Development						
4. Supervision						
5. Leadership						
6. TWIST files review and follow-up						
7. Breastfeeding promotion						
8. Nutrition Education						
9. Attendance/Meeting Deadlines						
C. Work Relationships						
1. With other staff members						
2. With supervisor						
3. With parents/clients						
4. Outside of agency						

COMMENTS: (Regarding overall performance, changes in responsibilities or performance since last evaluation, employee career development interests, and improvements needed for advancement).

Employee _____

Supervisor _____

Date _____

Employee signature indicates acknowledgment of this review, not agreement.

EMPLOYEE COMMENTS (regarding evaluation)

