

# LONG EMPLOYEE PERFORMANCE APPRAISAL

| Name:   |   | Date of Review:   |                                |
|---|---|-------------------|--------------------------------|
| Department:   |   | Title:            |                                |
| Reason for Review: <input type="checkbox"/> Annual <input type="checkbox"/> 6 mos Review <input type="checkbox"/> 90-day Review <input type="checkbox"/> Other  |   |                   |                                |
| Hire Date:  |   | Last Review Date: | Next Review Date:              |
| <b>Instructions:</b> Evaluate the employee's work performance in relation to current job requirements. Fill in the appropriate rating in rating box per descriptions listed below. Give specific examples as much as possible. Put N/A in comments if not applicable. |   |                   |                                |
| <b>Instructions:</b> Evaluate the employee's work performance in relation to current job requirements. Check corresponding rating box. Give specific examples as much as possible. Put N/A in comments if not applicable.   |   |                   |                                |
| O   | <b>Outstanding</b> – Exceptional performance in all areas. Performs far superior to others in similar position.   |                   |                                |
| VG  | <b>Very Good</b> – Considered an expert in the responsibilities assigned to employee. Performs above expectations.  |                   |                                |
| G   | <b>Good</b> – Competent and dependable level of performance. Meets performance standards of the job.  |                   |                                |
| I   | <b>Improvement Needed</b> – Performance is deficient in certain areas as identified. Improvement is necessary.  |                   |                                |
| U   | <b>Unsatisfactory</b> – Performance and results require significant, immediate improvement. No pay rate increase will be granted to employees who have any ratings at this level. Continued employment requires corrective action in a agreed upon timeframe. |                   |                                |
| GENERAL FACTORS   |   | RATING            | SUPPORTIVE DETAILS OR COMMENTS |
| 1.  | <b>Financial &amp; Administration</b><br><i>Quality</i> –The extent to which an employee's work is accurate, thorough, and neat. Work is completed in a timely, cost effective, and profitable manner.  |                   |                                |
| 2.  | <i>Productivity</i> –The extent to which an employee efficiently produces a significant volume of high quality work in a specified period of time and meets or exceeds customer's expectations.   |                   |                                |
| 3.  | <i>Initiative</i> –The extent to which an employee seeks out new assignments, assumes additional duties when necessary.   |                   |                                |
| 4.  | <i>Effort and Hustle</i> –The extent to which an employee exhibits a sense of urgency and generally understands the need to perform work in a time effective manner.  |                   |                                |
| 5.  | <i>Judgment</i> –The extent to which an employee acts with integrity and honesty and demonstrates good ethical judgment and decision-making skills.   |                   |                                |
| 6.  | <i>Profitability</i> –Job responsibilities are efficiently executed and contribute to LONG profitability. Ensures LONG is properly compensated for all work performed and/or material/equipment provided.   |                   |                                |
| 1.  | <b>Customer Service &amp; Sales</b><br><i>Reliability</i> –The extent to which an employee can be relied upon regarding efficient, accurate, and timely task completion and follow up.  |                   |                                |
| 2.  | <i>Availability</i> –The extent to which an employee is punctual, observes prescribed work break and meal periods and meets deadlines. Works reasonably assigned overtime.  |                   |                                |
| 3.  | <i>Independence</i> –The extent to which an employee performs high quality work with little or no supervision.  |                   |                                |
| 4.  | <i>Creativity</i> –The extent to which an employee proposes ideas and finds new, better ways of doing things.   |                   |                                |

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|---|---|--|--|
| 5.  | <b>Interpersonal Relationships</b> —Cooperates, works, and communicates well with co-workers, supervisors, subordinates, and/or outside contacts in a respectful and empathetic manner.   |  |  |
| 6.  | <b>Customer Service</b> —Work to understand customer needs (internal and external) and provides world class service and solutions.  |  |  |
| 1.  | <b>Technical Job Knowledge</b> —The extent to which an employee possesses the practical and technical knowledge required and pursues additional job, company and business related knowledge and expertise.  |  |  |
| 2.  | Stays informed on all company and business unit activities.   |  |  |
| 1.  | <b>Safety Adherence to Policy</b> — Abides by all LONG and OSHA safety regulations at all times.  |  |  |
| 2.  | Drives defensively and obeys all traffic laws including LONG safe driver policy (avoids all confrontational driving situations).  |  |  |
| 3.  | Reports all observed and suspected LONG jobsite, office and/or warehouse safety violations to LONG safety supervisor and immediate supervisor for correction and/or remediation.  |  |  |
| 4.  | Maintains a neat, clean, organized and workmanlike workspace and/or assigned LONG vehicle, tools and property.  |  |  |
| 5.  | Follows all LONG employee rules, procedures and policies including employee manual.   |  |  |
| 1.  | <b>Overall Performance</b> – Rate employee’s overall performance in comparison to position, duties, and responsibilities.   |  |  |
| Accomplishments since last review:                                |   |  |  |
| Areas to focus on before next review:                             |   |  |  |
| Recommendations:  |   |  |  |
| Current Salary:   | Revised Salary:   | Effective Date:  | Follow-up: <input type="checkbox"/> Yes _____<br><input type="checkbox"/> No |
| Employee Signature:   |   | Date:  |  |
| Evaluator’s Signature   |   | Date:  |  |
| Copy of Driver's License provided or License verified by manager? |   | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Emergency contact info updated:                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |  |
| LONG assets verified by manager?                                  | <input type="checkbox"/> Computer Equipment (specifics noted on the Computer/Software Inventory Form)<br><input type="checkbox"/> Peripheral Equipment (specifics noted on the Computer/Software Inventory Form)<br><input type="checkbox"/> Software Loaded (specifics noted on the Computer/Software Inventory Form)<br><input type="checkbox"/> Cell Phone<br><input type="checkbox"/> Pager |  |  |