State of Oregon
**Vocational Rehabilitation**Department of Human Services
(541) 440-3371

**Work Performance Evaluation**

|  |  |  |  |
| --- | --- | --- | --- |
| Client Name: |  | Dates of Evaluation: |  |
| Position Title: |  | Job Site: |  |
| VR Counselor: |  | VR Counselor Ph#: |  |

 **Please rate the individual by checking the Appropriate Boxes:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Needs Improvement | Acceptable | Above Average |
| Arrives at work on time and completes shift | [ ]  | [ ]  | [ ]  |
| Regularly exhibits good hygiene | [ ]  | [ ]  | [ ]  |
| Dresses appropriately for the job setting and task to be performed | [ ]  | [ ]  | [ ]  |
| Demonstrates the ability to learn necessary job skills | [ ]  | [ ]  | [ ]  |
| Works efficiently | [ ]  | [ ]  | [ ]  |
| Physical Capacity to hand the work | [ ]  | [ ]  | [ ]  |
| Follows safety procedures | [ ]  | [ ]  | [ ]  |
| Is friendly and courteous | [ ]  | [ ]  | [ ]  |
| Is a cooperative team member | [ ]  | [ ]  | [ ]  |
| Accepts constructive criticism and suggestions for improvement | [ ]  | [ ]  | [ ]  |
| Able to transition from task to task | [ ]  | [ ]  | [ ]  |
| Stays on task | [ ]  | [ ]  | [ ]  |
| Pays attention to detail | [ ]  | [ ]  | [ ]  |
| Follows written and verbal instructions well | [ ]  | [ ]  | [ ]  |
| Asks for assistance when needed | [ ]  | [ ]  | [ ]  |
| Communicates appropriately  | [ ]  | [ ]  | [ ]  |
| Work Tolerance ( ability to manage stressful situations) | [ ]  | [ ]  | [ ]  |

OVERALL PERFORMANCE: [ ]  Above Average [ ]  Acceptable [ ]  Needs Improvement
Would this individual be competitive for future employment in this career field? [ ]  Yes [ ]  No

|  |
| --- |
| Comments (Strengths/problem areas/need for change): |
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|  |
|  |

Please send filled out Work Performance Evaluation to:
Vocational Rehabilitation, 2020 NW Newcastle, Roseburg OR 97470

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| --- | --- | --- |
|  |  |  |
| Evaluator Name (print) |  | Evaluator Title |
|  |  |  |
| Signature  |  | Signature Date |