

**CITY OF ATLANTA
PERFORMANCE EVALUATION FORM**

EMPLOYEE DATA		
Last Name <u>Junnier</u>	First Name <u>Gregg</u>	Initial <u>E</u>
People Soft ID# <u>59700</u>	Job Class Title <u>Investigator</u>	Department <u>Police</u>
Bureau/ Division <u>C.I.D.</u>	Section <u>S.E.S.</u>	Unit <u>Narcotics</u>
Evaluation Period (Month/Day/Year) From <u>08/01/06</u> To _____		
EVALUATION CONFERENCE		
Probationary Evaluations: <input type="checkbox"/> New Hire <input type="checkbox"/> New Officer (end of probation) <input type="checkbox"/> Promotion		<input type="checkbox"/> Annual Evaluation <input type="checkbox"/> Close-out Evaluation (e.g., due to transfer or promotion) <input type="checkbox"/> Performance Improvement Plan Completed <input type="checkbox"/> Other (Please Specify) _____
Overall Rating (refer to Overall Performance Evaluation Rating Chart in performance manual) <input type="checkbox"/> Outstanding <input type="checkbox"/> Highly Effective <input type="checkbox"/> Effective <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Unacceptable		
Request Extension of Probationary Period Through _____ (Date)		
Rater Signature _____	Rater PeopleSoft ID# _____	Date _____
I have received a copy of my Evaluation and it has been discussed with me. <input type="checkbox"/> I agree with the rating. <input type="checkbox"/> I disagree with the rating and request a review.		
Employee Comments:		
Employee Signature _____	Date _____	
EVALUATION REVIEWED BY		
Department Evaluation Reviewer _____	Date _____	
Bureau Head or Equivalent _____	Date _____	
Other Signature (if applicable) _____	Date _____	
Department Head or Designee _____	Date _____	

OVERALL EVALUATION SUMMARY

CITY OF ATLANTA

PERFORMANCE DEVELOPMENT PLAN	Last Name <u>Junnier</u> First Name <u>Gregg</u> Initial <u>E</u>		
	People Soft ID# <u>59700</u> Job Class Title <u>Police Investigator</u>		
	Department Strategy <u>Reduce Crime and promote the quality of life, in partnership with our community.</u>		
	CRITICAL JOB ELEMENT # 2 OPERATIONAL PROCEDURES		
	<p>Performance Indicators & Sources: Performanc is Effective when: No more than three incidents during the annual evaluation period, an employee (1) fails to turn in a complete and legible written correspondance when required. (2) fails to swipe/sign in and out for his or her tour of duty and notify a supervisor or designated person whe he/she is going to be late/absent. (3) does not have all his/her equipment present, clean and updated during a monthly inspection. (4) fails to complete an assigned task within a presecribed deadline. Effective rating: 2 indicators must be must. Highly effective: 3 indicators must be met. Outstanding: All four indicators must be met. Needs improvovement less than 2 met.</p>		
	Rater Signature <u>[Signature]</u>	Date <u>080106</u>	
	Employee Signature <u>[Signature]</u>	Date <u>080106</u>	
	CONTINUATION OF EVALUATION UNDER NEW RATER (IF APPLICABLE)		
	New Rater Signature	Date	
	Employee Signature	Date	

PERFORMANCE EVALUATION	CJE RATING		
	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Highly Effective	<input type="checkbox"/> Effective
	<input type="checkbox"/> Needs Improvement	<input type="checkbox"/> Unacceptable	
	RATING JUSTIFICATION (DOCUMENTATION SHOULD BE RETAINED IN DEPARTMENT)		
	Rater Signature	Date	

CITY OF ATLANTA

PERFORMANCE DEVELOPMENT PLAN	Last Name <u>Junnier</u> First Name <u>Gregg</u> Initial <u>E</u>
	People Soft ID# <u>59700</u> Job Class Title <u>Police Investigator</u>
	Department Strategy <u>Reduce Crime and promote the quality of life, in partnership with our community.</u>
	CRITICAL JOB ELEMENT # 1 DEPARTMENT POLICIES AND PROCEDURES
<p>Performance Indicators & Sources: Performance is Effective when: During the year evaluated, an employee has (1) no more than three incidents of not properly conforming to directives, policies and procedures. Highly Effective: No more than two incidents. Outstanding: No incidents. Needs Improvement: more than 3 but less than 5 instances. Unacceptable: More than 5 instances of failing to conform to directives, policies and procedures.</p>	
Rater Signature <u>[Signature]</u> Date <u>080106</u>	
Employee Signature <u>[Signature]</u> Date <u>080106</u>	
CONTINUATION OF EVALUATION UNDER NEW RATER (IF APPLICABLE)	
New Rater Signature _____ Date _____	
Employee Signature _____ Date _____	

PERFORMANCE EVALUATION	CJE-RATING
	<input type="checkbox"/> Outstanding <input type="checkbox"/> Highly Effective <input type="checkbox"/> Effective <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Unacceptable
	RATING JUSTIFICATION (DOCUMENTATION SHOULD BE RETAINED IN DEPARTMENT)
Rater Signature _____ Date _____	

CITY OF ATLANTA

PERFORMANCE DEVELOPMENT PLAN

Last Name Junnier First Name Greg Initial G
People Soft ID# 59700 Job Class Title Police Investigator

Department Strategy Reduce Crime and promote the quality of life, in partnership with our community.

CRITICAL JOB ELEMENT # 3 ENFORCEMENT OPERATIONS

Performance Indicators & Sources: Performance is Effective when: During the evaluated year an employee averages at least 2 search warrants per month, clears 50% of their assigned lead sheets by arrest, and is within 30% of the yearly watch average in arrests. Highly Effective : averages at least 3 search warrants per month, clears 60% of their assigned lead sheets by arrest, and exceeds the yearly watch average by 5%. Outstanding: averages at least 4 search warrants per month, clears 70% of their lead sheets by arrest, and exceeds the yearly watch average by 10%. Needs Improvement: averages 1 search warrant per month, clears between 30 and 49% of their lead sheets by arrest and fails to meet the watch average in arrests by 5%. Unacceptable: No search warrants, clears less than 30% of lead sheets by arrests and fails to meet the watch average by 6% or greater.

Rater Signature [Signature] Date 080106

Employee Signature [Signature] Date 080106

CONTINUATION OF EVALUATION UNDER NEW RATER (IF APPLICABLE)

New Rater Signature _____ Date _____

Employee Signature _____ Date _____

PERFORMANCE EVALUATION

CJE RATING

- Outstanding
- Needs Improvement
- Highly Effective
- Unacceptable
- Effective

RATING JUSTIFICATION (DOCUMENTATION SHOULD BE RETAINED IN DEPARTMENT)

Rater Signature _____ Date _____