

**Addendum to Employee Handbook
Custodians
Revised October 2009**

Training and Certification - Special courses for technical licenses required by the district will be provided without cost to the employee. Any expenses incurred by the employee for obtaining special courses or licenses required by the district will be reimbursed to the employee.

School Cancellation

In the event of a **school closure day**, all custodial staff will be expected to report to work and remain at their work-site through the duration of their work assignment. If the employee is unable to work, he/she will utilize appropriate leave or receive no compensation.

In the event of a **district closure day**, all custodial staff will be expected to report to work. Custodians, as emergency personnel, are to work on a district closure day however, with the approval of the immediate supervisor, may leave prior to the end of their normal workday once snow removal and other weather related activities are completed.

Custodians who work on a district closure day will be paid as if they worked for the entire day.

A custodian who is unable to work on a district closure day must take appropriate leave for their entire scheduled workday. If a custodian is unable to work on a district closure day and no appropriate leave is available, he/she will receive no compensation for the day.

Reporting Times When School is Cancelled

In the event of either a school or district closure, first shift employees will report at their regularly scheduled time unless directed differently by their supervisor. Second shift employees will report by 10:00 A.M. or at a time pre-determined by the supervisor. Third shift employees will remain on their regular work schedule unless directed differently by the supervisor.

In the event of school cancellation, employees may visit the LPS website at www.lps.org or call 436-1000 to obtain information about the type of closure day that has been designated.

Appraisal - Custodial employees are to be appraised periodically during the first three months in a new assignment, annually for the first two years, and every other year thereafter. If an employee has not received an appraisal within the time frame described above, one may be requested from his/her supervisor.

The appraisal schedule and format are subject to change.

This addendum is not a contract of employment.

PERFORMANCE APPRAISAL
Custodial, Distribution, Maintenance, Nutrition Services and Transportation Employees
Lincoln Public Schools

Employee	Position	Location
Social Security Number	Date of Rating	Date of Last Rating

- E: EXCELLENT** – Exceeds expectations
G: GOOD – Meets expectations
NI: NEEDS IMPROVEMENT – Attention to this item is necessary to meet expectations
U: UNSATISFACTORY – Considerably below expectations; requires immediate attention

I. JOB PERFORMANCE

Quality of Work

Follows through on details and exhibits general ability to handle assigned tasks	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Quantity of Work

Consistently performs assigned work in time allotted	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Knowledge of Job

Exhibits thoroughness in learning procedures, tasks and other details; maintains alertness to changing job requirements	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Job Skills

Possesses skills required to complete tasks	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Work Habits

Organizes work	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Takes good care of equipment	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Is neat	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Follows safety regulations/rules	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Dependability

Follows established work methods	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Exhibits ability to do job without close supervision	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

II. PERSONAL

Cooperation

Exhibits willingness to adjust to schedule changes	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Helps others	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Attitude

Exhibits enthusiasm for work	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Is willing to meet job requirements	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Readily accepts suggestions	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Supports goals and objectives of the district	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Relationships with People

Exhibits positive relations with other individuals during the daily work assignment	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Is a good team worker	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Makes effort to gain respect of others	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Works effectively with all school audiences	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Uses non-sexist and culturally appropriate language	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Personal Fitness

Exhibits emotional stability	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Appears to possess physical stamina necessary to complete job requirements	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Has appropriate appearance for the assigned tasks	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Punctuality and Attendance

Comes to work on time	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Uses provided leave appropriately	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Works through the assigned hours	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Follows proper reporting procedures	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Initiative

Makes good use of time	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Conforms to rules and regulations	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Notices things to do and does them	<input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U
Comments:	

Innovation

Employee shows unusual initiative in suggesting improvement in practices, procedures or facility changes within the department. (Optional)	
Comments:	

Supervisor Comments:
Employee Comments:

This appraisal has been reviewed with the undersigned employee.

Supervisor

Date

Administrator (if applicable)

Date

* _____
Employee

Date

*Indicates employee had conference with supervisor but does not necessarily mean agreement with the rating.