

Cooperative Extension Service

Performance Appraisal County Extension Agent Reporting Form

Name _____

County _____ Date _____

Position Responsibility

Agriculture _____ %

Family and Consumer Sciences _____ %

4-H Youth Development _____ %

Community Development..... _____ %

Staff Chair Responsibility _____ %

_____ %



Performance Appraisal Reporting Form

I. Program Planning and Development

List program committees that you lead and/or serve on.

Name of Committee	Attendance	Minutes	
		Yes	No

Have you submitted your subcommittee top five program priorities? _____ Yes _____ No

- List Your Partners and Collaborators**

 1. _____
 2. _____
 3. _____
 4. _____
 5. _____
 6. _____
 7. _____
 8. _____
 9. _____
 10. _____

II. Program Implementation/Evaluation

List major programs and educational activities you implemented.

Date	Educational/Outreach Program	Number Attending (un-duplicated)	Number of Sessions	Teaching Method	Evaluation Data Collection	Teaching Role	
						Yes	No
				Choices	Choices		
				Demonstrations	participant data		
				Educational Class	pre/post test		
				Field Day/ Tour/Camp	post test only		
				Meetings	end of session evaluation		
				Train the Trainer Workshop	qualitative measures such as soil test, water, survey, cholesterol		
				Web-Based Instruction/ Education	case study		
					focus group		
					interviews/ testimonials		

Agriculture agent demonstrations

Name of Demonstration	Cooperating Producer	Notes/How Shared

Technology Use

Do you use a work-related social media: _____ Other, list

facebook page _____

twitter account _____

instagram _____

Is your section of the county web page updated monthly?

Yes

No

Are you using Zoom or another distance conferencing to teach?

Yes

No

III. Professional Development Trainings and Activities in Which You Have Participated

List Extension in-service trainings, national meetings and other professional development activities in which you have participated.

Date	Name of Training or Activity	County (C) Regional (R) State (S) National (N)	Were you a presenter?	
			Yes	No

IV. Professionalism Questionnaire

	Seldom	Usually	All of the Time
<i>Circle the number that best represents your behavior.</i>			
1. Do you answer correspondence, e-mails and other electronic messages within two days after receiving it?	1	2	3
2. Do you keep appointments when you set them?.....	1	2	3
3. Are you punctual for appointments?	1	2	3
4. Do you return telephone calls within one day or in a reasonable time after receiving them?.....	1	2	3
5. Do you submit soil samples and other diagnostic samples in a reasonable time?.....	1	2	3
6. Do you start meetings and/or activities on time?	1	2	3
7. Do you stop meetings and/or activities at a predetermined or agreed upon time?.....	1	2	3
8. Are you punctual in making all arrangements for meetings?	1	2	3
9. Do you have a plan for sending out event reminders, newsletters, etc.?	1	2	3
10. Does your office present a professional and welcoming atmosphere?	1	2	3
11. Do you submit reports on time?	1	2	3
12. Do you assist your county co-workers with programs and other routine tasks?.....	1	2	3

V. Community and Organizational Leadership

Committees on Which You Serve

List committees on which you serve, such as Extension committees, professional associations, civic groups, etc., not listed in section 1.

Name of Committee	Local (L) Regional (R) State (S) National (N)

Funding

List funding sources (monetary and in-kind) received to support your program.

Funding Source	Amount	Purpose	Monetary	In Kind

Date and location of your interpretive event

_____ Date

_____ Location