



## JOB ORDER (JO) WORKER EVALUATION FORM

Name of Job Order Worker: **DAISY E. PANTORILLA**

Equivalent Job Title: **Administrative Aide III**

Name of Evaluator: **JOEL REY U. ACOB**

Date: **June 12, 2021**

Instruction to evaluators: Please write your comments on the performance and work ethics of the above JO worker and give your ratings by checking the appropriate number using the rating scale below:

5 – Excellent

4 – Very Good

3 – Good

2 – Fair

1 – Poor

Criteria/evaluation statement	Rating					Comments
	5	4	3	2	1	
<b>I. Work Performance</b>						
1. Performance of all mandated functions as listed in the contract	/					
2. Over all attainment of outputs agreed with supervisor	/					
3. Quality and timeliness in the attainment of agreed outputs	/					
4. Efficiency and customer friendly frontline service to clients	/					
5. Knowledge on the over-all aspect of the job assignments	/					
<b>II. Work Ethics/Attitude</b>						
1. Industriousness - setting clear & attainable objectives & taking targets seriously and responsibly	/					
2. Diligence and justice at work - prompt in accomplishing assigned tasks and submission of good quality outputs	/					
3. Responsibility - having the right intention, with a sense of duty and accepts all jobs assigned by the supervisor	/					
4. Practices teamwork - understanding and performing his/her role effectively and synergistically, share knowledge and provide a lending hand to needy co-worker	/					
5. Commitment to public service – reporting on time and willingly extend service if needed without thinking of additional compensation	/					

Evaluator's additional comments/recommendations:

What are the employee's strong points?

- can work with minimal supervision  
- able to discuss points which are critical to office operations

What are the employee's weak points?

- none

What intervention would you recommend to make the JO worker more effective?

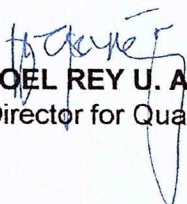
- sending her to training & other staff - development activities

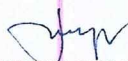
Final recommendation:

☒ renewal of the contract for another 3 months  
☐ non-renewal of the contract due to below par performance

Certified Correct:

Approved:

  
**JOEL REY U. ACOB**  
Director for Quality Assurance Center

  
**PROSE IVY G. YEPES**  
President