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|  | **ORANGE COUNTY**  **EMPLOYMENT SKILLS DEVELOPMENT CHART** |

**Directions: This form is used for on-campus or community-based work training evaluation.**

**Please check one: On-Campus  Community-Based Work Training**

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| --- | --- | --- |
| **Participant:** | | **Site:** |
| **Evaluator:** | | **Date:** |
| **SCORING: (1) Does Not Perform, (2) Physical Assistance, (3) Direct Prompts, (4) Indirect Prompts, (5) Independent** | | |
| **Follows Directions** | | |
|  | * **Verbal** 1 Step  2 Steps  3 Steps  4 Steps  5 Steps+ | |
|  | * **Written Statement** (Standard job duty list) | |
|  | * **Visual Schedule** Word  Picture  Word + Picture | |
|  | * **Follows all work site rules** | |
|  | * **Follows expected behaviors in assigned department, as specified by manager/supervisor** | |
|  | * **Follows all workplace emergency safety protocols** | |
| **Notes: Total: \_\_ /30=\_\_\_\_ %** | | |
| **Dress/Hygiene** | | |
|  | * **Dresses appropriately to work place setting** (uniform or professional dress) | |
|  | * **Appropriate hygiene** Clean and styled hair  Clean teeth  No body odor  Make-up, as needed | |
| **Notes: Total: \_\_ /10=\_\_\_\_ %** | | |
| **Time Management and Employer Expectations** | | |
|  | * **Arrives to work on time** | |
|  | * **Follows work schedule taking appropriate amount of time for breaks and lunch** | |
|  | * **Leaves work on time** | |
|  | * **Requests time off using established protocol and with at least two weeks’ notice** | |
|  | * **Maintains excellent attendance/uses limited sick time, as needed** | |
| **Notes: Total: \_\_ /25=\_\_\_\_ %** | | |
| **Work Tasks (specific to work training duties/job description)** | | |
|  | * **Completes all job duties as identified in job description** | |
|  | * **Completes tasks with 100% accuracy as defined by employer** | |
|  | * **Works as part of a team** | |
|  | * **As problems arise, assists in the solution process** | |
|  | * **Handles conflicts, that arise, in an appropriate manner** | |
|  | * **Requests additional work when assigned tasks have been completed** | |
| **Notes: Total: \_\_ /30=\_\_\_\_ %** | | |
| **Productivity/Quality of Work** | | |
|  | * **Completes assigned tasks within time frame expected by employer** | |
|  | * **Works at appropriate rate** | |
|  | * **Work completed meets quality standards as defined by employer** | |
|  | * **Requests accommodations when needed** | |
| **Notes: Total: \_\_ /20=\_\_\_\_ %** | | |
| **Communication and Socializations with Supervisor and Co-workers** | | |
|  | * **Greets co-workers as appropriate** support staff  co-workers  supervisors | |
|  | * **Demonstrates a good attitude at all times** | |
|  | * **Speaks respectfully to** support staff  co-workers  supervisors  customers, where present | |
|  | * **Aware of and follows social boundaries** | |
|  | * **Uses work related technology appropriately** | |
|  | * **Uses restroom appropriately** | |
|  | * **Appropriately participates in conversations** | |
|  | * **Follows staff lounge rules for breaks and lunch** | |
|  | * **Follows chain of command with questions or concerns** | |
|  | * **Shows enthusiasm for the job by taking initiative and showing commitment to the company** | |
| **Notes: Total: \_\_ /50=\_\_\_\_ %** | | |
| **Utilizing Workplace Natural Supports and/or Job Coaching** | | |
|  | * **Requests help from supervisor/co-workers, as appropriate** | |
|  | * **Initiates request for help at appropriate time** | |
|  | * **Keep supervisor informed when job duties are complete** | |
|  | * **Follows job coach &/or co-worker instructions** | |
| **Notes: Total: \_\_ /20=\_\_\_\_ %** | | |
| **Mobility/Community Safety/Transportation Options** | | |
|  | * **Uses public transportation, para-transit or provides own transportation to get to job/work training site** | |
|  | * **Follows all safety precautions needed to get to job/work training site** | |
| **Notes: Total: \_\_ /10=\_\_\_\_ %** | | |
| **ACCOMMODATION NEEDS: Overall Total: \_\_\_/195=\_\_\_\_%** | | |

**OCWBL#2: 6-13-16**