

Bill Host  
 Superintendent  
 717-291-4825

PLEASE RETURN TO HUMAN RESOURCES NO LATER THAN APRIL 30.

CITY OF LANCASTER, PA

PERFORMANCE EVALUATION FORM

1. Name of Employee: Stephen H. Vold  
 2. Position Title: Sludge Treatment Supervisor  
 3. Department/Bureau: Sewer/Sewage Treatment  
 4. Period Covered by Report: From 04/28/92 To 04/28/93

EVALUATION FACTORS	BELOW REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS	OUTSTANDING
	1/			1/
5. Quality of Work				X
6. Quantity of Work				X
7. Work Habits				X
8. Personal Relations			X	
9. Adaptability			X	
10. Judgement			X	
11. Supervisory Ability (To be used in evaluating Supervisory employees only)			X	

12. COMMENTS: Recognition for superior work; suggestions for improving performance; explanation of checks in "Below Requirements" and "Outstanding" columns. IF additional space is needed use reverse side of this form.

Steve continues to perform his work duties far beyond what is expected. He represents the city as a model employee through his contacts with other municipalities he has made Lancaster known throughout the country with his knowledge of composting process control.

1/ A check mark in this column MUST be justified in Item 12 "COMMENTS"

13. SUPERVISOR'S CERTIFICATION: This evaluation is based on my observation of this employee for the period indicated in Item 4. It represents my best judgement of this employee's performance.

*William B. Host*  
 Signature of Supervisor making the Evaluation

5-11-93  
 Date

14. EMPLOYEE: I have read and have had an opportunity to discuss this evaluation of my work with my supervisor. I realize that my signature on this form does not mean that I agree with this evaluation.