COUNTY OF LOS ANGELES
DEPARTMENT OF HUMAN RESOURCES

HEADQUARTERS
579 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012
(213) 974-2406 FAX (213) 621-0387

BRANCH OFFICE
3333 WILSHIRE BOULEVARD, SUITE 1000 • LOS ANGELES, CALIFORNIA 90010
(213) 738-2299 FAX (213) 637-0823

MICHAEL J. HENRY
DIRECTOR OF PERSONNEL

January 16, 2008

To: All Department Heads

From: Michael J. Henry
Director of Personnel

Subject: **PERFORMANCE EVALUATION REPORT**

We are requesting your assistance in completing the Performance Evaluation Summary Report. This report is for the six-month period **July 1, 2007, through December 31, 2007**, and is due by **Friday**, **February 1, 2008**.

As you know, this data is collected for each six-month period ending December and June. In the last reporting period, twenty-nine departments reported an overall completion rate of 100 percent. We appreciate the efforts of all, and continue to offer assistance to departments in completing timely performance evaluations. Attached is a copy of the Status Report form, which includes a signature box for Department Heads. Please indicate in the space provided the total number of annual and probationary evaluations due and the total number of annual and probationary evaluations completed for this period. Also, please indicate the number of evaluations completed by rating category. Review of MAPP evaluations will be handled separately at the completion of our annual evaluation cycle.

Additionally, my staff is available to provide Performance Evaluation Workshops in response to departmental interest in preparing supervisors to manage performance and write Annual Performance Evaluation Reports.

If you have any questions regarding completing the attached form, or wish to inquire about training, please have your staff contact Lisa McClough at (213) 738-3448.

MJH:TJH
LT:LM

Attachment

c: Each Supervisor
DCEO, Operations
Administrative Deputies
Departmental Human Resources Managers

PERFORMANCE EVALUATION STATUS REPORT – SIX-MONTH SUMMARY

Department:	Reporting Period: Jul. 1–Dec. 31, 2007	Date Submitted:
Contact Person:	Title:	Phone Number:
Approved By:	Title:	Phone Number:
Department Head (Signature)		

Number of annual and probationary evaluations due for this period: _____

Of those due, number of evaluations completed for this period: _____

Number of evaluations completed by rating:

RATING	ANNUAL	PROBATIONARY
Outstanding		
Very Good		
Competent		
Improvement Needed		
Unsatisfactory		
TOTALS		

Please submit by **Friday, February 1, 2008** to:

Lu Takeuchi, Sr. Human Resources Manager
3333 Wilshire Blvd., Suite 350
Los Angeles, CA 90010
Fax: (213) 637-0823

If you have any questions regarding this form, please call Lisa McClough at (213) 738-3448.