

Performance Evaluation

Pete Gardner, City Manager

- 4 1. Communication
- 4 2. Relations with City Commission
- 5 3. Budgeting and Fiscal Management
- 4 4. Asset Management
- 4 5. Planning and Organization
- 5 6. Decision Making
- 5 7. Professional and Leadership Skills
- 5 8. Community Relations
- 5 9. Management of Employees
- 5 10. Program Development and Follow Through

Overall Rating 4.6

  
\_\_\_\_\_  
(Signature of Commissioner)

9-1-14  
\_\_\_\_\_  
(Date)

Performance Evaluation Summary Sheet

Pete Gardner, City Manager

Commissioner Terry Pittman \_\_\_\_\_

Vice-Mayor Suzy Wilson \_\_\_\_\_

Commissioner Bobbi Hosegood \_\_\_\_\_

Mayor J.R. Sullivan \_\_\_\_\_

Commissioner Cory Coler \_\_\_\_\_

Overall Rating by Commissioners \_\_\_\_\_

Rating Scale:

- 1 - Unsatisfactory;
- 2 - Needs Improvement;
- 3 - Good
- 4 - Very Good;
- 5 - Outstanding

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 8-27-14

Name of Employee DAWN WRIGHT

Position City Clerk Department Administration

Name of Supervisor Pete Goodwin

Review period: From 10-1-13 to 9-1-14 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** (Consider the quality of work produced and the promptness with which it is completed.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Continues to be excellent

2. **Productivity** (Consider the ability to produce quantity of accepted work that meets company standards.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

3. **Knowledge of Job** (Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Continues to grow in knowledge of job

4. **Reliability and Dependability** (Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Very reliable - could not do any more

5. **Attendance** (Consider overall attendance records and punctuality.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

6. **Initiative** (Consider the extent to which new work assignments and additional duties are sought out when necessary.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Continues to have excellent initiative

7. **Creativity** (Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** (Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Excellent - has become a real leader

9. **Adherence to Company Policies** (Follows policies and procedures regarding safety, security, harassment-free environment and others.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** (Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Continues to work well with Public

Additional Comments

Dawn has shown excellent initiative in what she does and has worked very hard on improving relationships with the organization. Dawn has become a leader - excellent employee

Employee's Comments

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Supervisor's Signature [Signature] Date 8-27-14

Employee's Signature [Signature] Date 8-27-14  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature [Signature] Date 8-27-14

CITY OF EAGLE LAKE  
P.O. BOX 129  
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863-293-4141

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 08.27.2014

Name of Employee DAWN WRIGHT

Position CITY CLERK Department Admin

Name of Supervisor Boates

Review period: From \_\_\_\_\_ to \_\_\_\_\_ 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** (Consider the quality of work produced and the promptness with which it is completed.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

2. **Productivity** (Consider the ability to produce quantity of accepted work that meets company standards.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

3. **Knowledge of Job** (Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

4. **Reliability and Dependability** (Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

5. **Attendance** (Consider overall attendance records and punctuality.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

6. **Initiative** *(Consider the extent to which new work assignments and additional duties are sought out when necessary.)*

Outstanding   Very Good   Good   Needs improvement   Unsatisfactory

Comments: \_\_\_\_\_

7. **Creativity** *(Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)*

Outstanding   Very Good   Good   Needs improvement   Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** *(Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)*

Outstanding   Very Good   Good   Needs improvement   Unsatisfactory

Comments: \_\_\_\_\_

9. **Adherence to Company Policies** *(Follows policies and procedures regarding safety, security, harassment-free environment and others.)*

Outstanding   Very Good   Good   Needs improvement   Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** *(Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)*

Outstanding   Very Good   Good   Needs improvement   Unsatisfactory

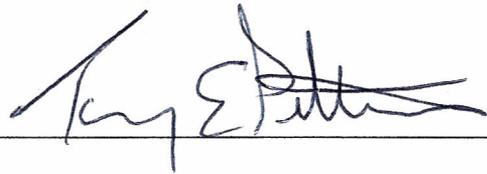
Comments: \_\_\_\_\_

Additional Comments

I ANTICIPATE DAWN TO AFFORD THE CITY COMMISSION WITH STRONG LEADERSHIP DURING THE CITY MANAGER TRANSITION PERIOD. DAWN IS A PROFESSIONAL PUBLIC SERVANT.

Employee's Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature  Date 08.27.2014

Employee's Signature  Date 9-3-14  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 9-3-14

Name of Employee Dawn Wright

Position City Clerk Department Admin

Name of Supervisor Commission

Review period: From \_\_\_\_\_ to \_\_\_\_\_ 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** *(Consider the quality of work produced and the promptness with which it is completed.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

2. **Productivity** *(Consider the ability to produce quantity of accepted work that meets company standards.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

3. **Knowledge of Job** *(Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

4. **Reliability and Dependability** *(Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

5. **Attendance** *(Consider overall attendance records and punctuality.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

6. **Initiative** *(Consider the extent to which new work assignments and additional duties are sought out when necessary.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

7. **Creativity** *(Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** *(Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

9. **Adherence to Company Policies** *(Follows policies and procedures regarding safety, security, harassment-free environment and others.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** *(Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

Additional Comments

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Employee's Comments

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Supervisor's Signature  Date 9-3-14

Employee's Signature  Date 9-3-14  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 09-01-2014

Name of Employee Dawn Wright

Position City Clerk Department ADM

Name of Supervisor COMMISSINER

Review period: From \_\_\_\_\_ to \_\_\_\_\_ 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** (Consider the quality of work produced and the promptness with which it is completed.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

2. **Productivity** (Consider the ability to produce quantity of accepted work that meets company standards.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn has outstanding time management skills and follow through

3. **Knowledge of Job** (Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Being new in this position, Dawn has had an open door policy and knows her job responsibilities to the tee

4. **Reliability and Dependability** (Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Always there to answer questions

5. **Attendance** (Consider overall attendance records and punctuality.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

6. **Initiative** *(Consider the extent to which new work assignments and additional duties are sought out when necessary.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

7. **Creativity** *(Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** *(Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

9. **Adherence to Company Policies** *(Follows policies and procedures regarding safety, security, harassment-free environment and others.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** *(Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

Additional Comments

Dawn has been a great help with any questions and/or concerns I have had in my new position.

Employee's Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature John Bob Hosyoud Date 09-01-2014

Employee's Signature Dawn Wuggett Date 9-4-2014  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 9/2/2014

Name of Employee Dawn Wright

Position City Clerk Department Administration

Name of Supervisor Pete Gardner

Review period: From 2014 to 2014 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** (Consider the quality of work produced and the promptness with which it is completed.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn is extremely detail oriented and makes sure all items are handled

2. **Productivity** (Consider the ability to produce quantity of accepted work that meets company standards.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn always has her assigned tasks completed efficiently

3. **Knowledge of Job** (Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn is thorough in her understanding of what is necessary

4. **Reliability and Dependability** (Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn provides accurate, timely data where relevant

5. **Attendance** (Consider overall attendance records and punctuality.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Dawn is punctual and readily available when called upon

6. **Initiative** (Consider the extent to which new work assignments and additional duties are sought out when necessary.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

7. **Creativity** (Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** (Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Down appears ready to help any other city employee

9. **Adherence to Company Policies** (Follows policies and procedures regarding safety, security, harassment-free environment and others.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** (Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: Down works well with the public

Additional Comments

Down consistently provides the city and Commission with all of the necessary information while ensuring that all of our requirements are met.

Employee's Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature  Date 9-5-2014

Employee's Signature  Date 9-4-14  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

# EMPLOYEE APPRAISAL



CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

Date 9-1-14

Name of Employee Dawn Wright

Position CITY CLERK

Department ADMIN

Name of Supervisor \_\_\_\_\_

Review period: From 10/13 to 9/14 90-Day Six Month Review Annual Review

## PERFORMANCE CRITERIA

1. **Quality of Work** (Consider the quality of work produced and the promptness with which it is completed.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

2. **Productivity** (Consider the ability to produce quantity of accepted work that meets company standards.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

3. **Knowledge of Job** (Consider the knowledge of present job, of other work closely related to it, and of the equipment necessary to perform job functions.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

4. **Reliability and Dependability** (Consider the amount of supervision required, and job performance regarding timely completion and follow-up.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

5. **Attendance** (Consider overall attendance records and punctuality.)

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

6. **Initiative** *(Consider the extent to which new work assignments and additional duties are sought out when necessary.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

7. **Creativity** *(Consider the ability to offer suggestions and propose new and creative ideas and solutions to working situations.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

8. **Working Relationships** *(Consider the willingness to work with and help others, the ability to accept constructive criticism, and cooperate with fellow employees and supervisors.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

9. **Adherence to Company Policies** *(Follows policies and procedures regarding safety, security, harassment-free environment and others.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

10. **Relationship with Public** *(Ability to deal and interact with the public; image and manner in which an employee represents or conducts himself/herself in public.)*

Outstanding Very Good Good Needs improvement Unsatisfactory

Comments: \_\_\_\_\_

Additional Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee's Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature J.R. Sullivan Date 9-1-14

Employee's Signature [Signature] Date 9-4-14  
*(Indicates receipt of form and opportunity to provide comments)*

City Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF EAGLE LAKE  
P.O. BOX 129  
EAGLE LAKE, FL 33839  
863-293-4141

## Change Order No. 01

Date of Issuance: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Project: Bingham Street Stormwater Retrofit	Owner: City of Eagle Lake	Owner's Contract No.: 2014-01
Contract: Bingham Street Stormwater Retrofit	Date of Contract: April 21, 2014	
Contractor: L&SF Engineering Consultants Corp.	Engineer's Project No.: 600128.2	

**The Contract Documents are modified as follows upon execution of this Change Order:**

Description: See Attached

**Attachments: (List documents supporting change):**

Change Order 01 – Cover Letter

Change Order #1 Request from L&SF

**CHANGE IN CONTRACT PRICE:**

Original Contract Price:

\$ \_\_\_\_\_

Increase from previously approved Change Orders

No. \_\_\_\_\_ to No. \_\_\_\_\_:

\$ \_\_\_\_\_

Contract Price prior to this Change Order:

\$ \_\_\_\_\_

Increase of this Change Order:

\$ \_\_\_\_\_

Contract Price incorporating this Change Order:

\$ \_\_\_\_\_

**CHANGE IN CONTRACT TIMES:**

Original Contract Times:  Working days  Calendar days

Substantial completion (days or date): September 4, 2014

Ready for final payment (days or date): October 4, 2014

Increase from previously approved Change Orders

No. \_\_\_\_\_ to No. \_\_\_\_\_:

Substantial completion (days): 0

Ready for final payment (days): 0

Contract Times prior to this Change Order:

Substantial completion (days or date): September 4, 2014

Ready for final payment (days or date): October 4, 2014

Increase of this Change Order:

Substantial completion (days or date): October 22, 2014

Ready for final payment (days or date): November 21, 2014

Contract Times with all approved Change Orders:

Substantial completion (days or date): October 22, 2014

Ready for final payment (days or date): November 21, 2014

RECOMMENDED:

By: [Signature]  
Engineer

Date: 9/2/2014

ACCEPTED:

By: \_\_\_\_\_  
Owner

Date: \_\_\_\_\_

ACCEPTED:

By: [Signature]  
Contractor

Date: 9/2/2014

Approved by Funding Agency (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_

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## Change Order Instructions

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### A. GENERAL INFORMATION

This document was developed to provide a uniform format for handling contract changes that affect Contract Price or Contract Times. Changes that have been initiated by a Work Change Directive must be incorporated into a subsequent Change Order if they affect Price or Times.

Changes that affect Contract Price or Contract Times should be promptly covered by a Change Order. The practice of accumulating Change Orders to reduce the administrative burden may lead to unnecessary disputes.

If Milestones have been listed in the Agreement, any effect of a Change Order thereon should be addressed.

For supplemental instructions and minor changes not involving a change in the Contract Price or Contract Times, a Field Order should be used.

### B. COMPLETING THE CHANGE ORDER FORM

Engineer normally initiates the form, including a description of the changes involved and attachments based upon documents and proposals submitted by Contractor, or requests from Owner, or both.

Once Engineer has completed and signed the form, all copies should be sent to Owner or Contractor for approval, depending on whether the Change Order is a true order to the Contractor or the formalization of a negotiated agreement for a previously performed change. After approval by one contracting party, all copies should be sent to the other party for approval. Engineer should make distribution of executed copies after approval by both parties.

If a change only applies to price or to times, cross out the part of the tabulation that does not apply.