

APPENDIX J

EL CAMINO COMMUNITY COLLEGE DISTRICT

ACKNOWLEDGMENT OF OUTSTANDING WORK PERFORMANCE

FULL NAME OF EMPLOYEE

(Last Name First) _____

TITLE _____

DIVISION/DEPARTMENT _____

The employee named above is commended for outstanding work performance for the period beginning _____ and ending _____.

Below are specific examples or explanatory comments of the outstanding work performance of the employee:

Supervisor's Signature _____ Date _____

Employee - White
Personnel File - Yellow
Division - Pink

PN70-486