

**Work Ethic Mini Badge Check List**

***Positive Attitude***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

Daily community meeting completed

* + Demonstrated proper interaction with peers
  + Demonstrated proper interaction with supervisors
  + Demonstrated proper customer satisfaction
  + Demonstrated a positive attitude to supervisor feedback
  + Other: (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Honesty and Integrity***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

* + All workplace equipment and tools accounted for
  + Remained at job site and work area
  + Completed assignments as given
  + Other: (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Adaptability***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

* + Accepted and completed all assignments
  + Adjusted to challenges with a positive attitude
  + Other: (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Motivation to Learn and Grow***

**Participants Name:**

**Staff / Mentor Signature:**

* + Orientation completed: (Mandatory for participant if no previous work experience.)
  + Date(s):

Certifications / Licenses Completed: (Must complete a minimum of one national certification.)

* + - ServSafe

Date:

* + - HAZWOPER

Date:

* + - OSHA

Date:

* + - CNA

Date:

* + - Other Certification

Certification:

Date:

Auberle’s Job Readiness Program: (Must be in Auberle’s job readiness program for a minimum of 90 days.)

* Position:

Evaluation Period:

Soft Skill Development:

* Jump Start to Success

Date Completed:

* UPMC Power Program

Date Completed:

* Sanctuary Training

Date / Module

Completed:

* Other

Date and Skill Completed:

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Professionalism***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

* + Orientation completed.
  + Appropriate attire worn weekly
  + Professional language used weekly
  + Professional behavior demonstrated weekly
  + Cell phone policy and procedure followed
  + Social media policy and procedure followed
  + Other(Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Teamwork***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

* + Ropes course completed

Date(s):

* + Participated in all team building activities (List below with dates)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Punctuality***

**Participants Name:**

* + Paycom electronic payroll system used for measuring punctuality
  + Followed proper procedures for being late (no more than three late punches for ninety day evaluation period)

Comments (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



**Work Ethic Mini Badge Check List**

***Attendance***

**Participants Name:**

**Staff / Mentor Signature:**

* + Paycom electronic payroll reports will be used to measure attendance
  + Followed proper procedures for calling off (no more than three excused absences during ninety day evaluation period)

Comments (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Ability to Follow Direction***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

* + Completed assignments in proper timeframe
  + Adhered to supervisors directives

Comments (Use space below)

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**



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***Communication***

**Participants Name:**

**Date(s) Observed:** (Minimum of 10 observations during evaluation period)

**Staff / Mentor Signature:**

**Communication**

* + Used proper voice tone on the job site
  + Demonstrated proper attitude on the job site
  + Communicated openly with supervisor
  + Other

**Staff sign below when all requirements have been satisfied.**

**Staff Signature:**