

Appendix 6 Standard Performance Evaluation Form

Permit Holder
National Forest
Evaluation Period From
Type of Operation
Locations)

Dates) of field inspections)

Field Inspectors)

Camps) in operation during inspection: Yes No

Holder representative present during inspection

This evaluation is: Midseason

CHECK APPROPRIATE BOX

Checks in the boxes and comments must be based on factual objective information observed by inspectors and/or verified through investigation.

**O=Outstanding
A= Fully Acceptable
NI=Needs Improvement**

**U=Unacceptable
NC=Not Checked
NA= Not Applicable**

EVALUATION CATEGORIES

A. SERVICE TO PUBLIC	O	A	NI	U	NC	NA
1. Rates, services and accommodations provide represented.						
2. Holder shows courtesy to non-outfitted public.						
3. Operations properly coordinated with other landowners, if required.						
4. Compliance with requirements of Title VI of the Civil Rights Act.						
5. Clients received educational and interpretive information about area and its values.						

COMMENTS:

B. COMPLIANCE WITH PERMIT CONDITIONS	O	A	NI	U	NC	NA
1. Application, certificate of insurance, signing of permit and payments submitted on time and properly completed.						
2. Use reports submitted accurately and on time.						
3. Compliance with Federal, State, and County laws and regulations as required by permit.						
4. Compliance with other terms and conditions.						

COMMENTS:

C. COMPLIANCE WITH OPERATING PLAN.	O	A	NI	U	NC	NA
1. Holder participation in operating plan preparation						
2. Holder's employees knowledgeable of operating plan contents.						
3. Adherence to operating plan, schedules, and itineraries, notification of changes.						
4. Adherence to camp management plans, permitted structures, use of site(s).						

COMMENTS

D. EQUIPMENT/LIVESTOCK	O	A	NI	U	NC	NA
1. Equipment provided as advertised.						
2. Equipment safe and well-maintained.						
3. Boats, aircraft, or vehicles licensed or certified when required.						
4. Livestock treated properly and humanely.						

COMMENTS

E. SAFETY	O	A	NI	U	NC	NA
1. Holder exhibits a concern for health and safety of guests, employees, and general public.						
2. Staff current with first aid and knowledgeable of safety procedures.						
3. Guests receive a safety orientation to the operation.						

COMMENTS

F. RESOURCE PROTECTION	O	A	NI	U	NC	NA
1. Holder uses minimum impact techniques						
2. Operation neat and orderly.						
3. Compliance with fire regulations, Fish and Game regulations, protection of Cultural Resources.						
4. Following appropriate procedures for human waste management and garbage.						
5. Protection of threatened and endangered species.						

COMMENTS

G. MAJOR INCIDENTS, IF ANY.	O	A	NI	U	NC	N A
This category relates to handling of unusual incidents, accidents, death, significant resource damage, serious violation of law, or confrontations. Describe in separate attachments to this form.						

Special efforts worthy of commendation:

Prior performance deficiencies, if any, corrected:

OVERALL RATING: Outstanding _____ Acceptable _____ Probationary _____
Unacceptable ____

Outfitter-guide licensing board notified, if required? _____ Date _____

Board comments attached: Yes

No

This performance rating constitutes a decision which is subject to appeal pursuant to Secretary of Agriculture regulation 36 CFR 251, Subpart C. Any such appeal and a statement of reasons must be submitted within 45 days of the date of this rating to the Forest Service Official next higher to the authorized officer.

Signatures:

Authorized Officer _____

Date _____

Title: _____

Permit _____

Holder. _____

Date _____

Holders Comments:

The permit holder's signature acknowledges receipt and review of the rating, not necessarily agreement.

Ratings are confidential between the Forest Service and the holder to the extent allowed by law and regulation.