

PERFORMANCE REVIEW

EXECUTIVE DIRECTOR, TOURISM COMMISSION

REVIEW COMPLETED BY HANCOCK COUNTY TOURISM COMMISSION (HCTC)

HANCOCK COUNTY, INDIANA

Executive Director Name _____

RATING: 1 = needs improvement / 4 = excellent performance / U – unable to evaluate

	1. Oversees the general day-to-day operations of the Visitors Center including administrative, operating, and marketing functions for Hancock County Tourism.
	2. Advises, counsels and directs activities of volunteer staff in office and/or events.
	3. Act as Spokesperson for Hancock County Tourism.
	4. Coordinate with other county and state entities, organizations and partners to enhance the tourism industry of Hancock County.
	5. Plans and implements public events and information programs of the Visitors Center.
	6. Maintain communication with HCTC through monthly activity reports, attending monthly meetings and designated committee meetings in an advisory capacity.
	7. Coordinate and oversee the HCTC grant process
	8. Create and distribute marketing materials (print/electronic/etc) in an efficient manner promoting Hancock County Tourism.
	9. Work directly with all facilities offering overnight accommodations in Hancock County promoting Hancock County Tourism activities.
	10. Provides individual and group presentations to interested group(s) educating the overall community of the positive attributes of the Hancock County Tourism and related community issues.
	11. Understands all phases of the position as it relates to Hancock County Tourism's objectives, demonstrates and applies this knowledge to responsibilities and procedures.
	12. Understands and communicates industry wide trends and how they may impact the local hospitality community.
	13. Efficiently produces a significant volume of work in a specified time period.
	14. Can be relied upon regarding completion and follow-up of tasks.
	15. Is punctual, observes Visitor Center hours, and has an acceptable overall attendance record.
	16. Demonstrates proper judgement and decision making skills when necessary.

Notes/comments regarding ratings, if desired. Please indicate subject number (1, 3, 5, etc)	
Specific areas needing improvement	
Recommendations for professional development (seminars/training/etc)	
ATTACHMENT (S)	List of year to date accomplishments, list of goals for upcoming year

Executive Director: _____

HCTC President: _____

Date: _____