

Employee Name:

Position Title:

Department:

Review Period: Probationary Annual

Immediate Supervisor/Title:

INSTRUCTIONS: This form will be completed at the end of an employee’s probationary period and annually thereafter by the employee’s immediate supervisor. Once the review has been conducted, a copy is given to the employee, a copy is retained by the supervisor, and the original is sent to Human Resources. To select the applicable box, double click the box and then click 'checked' and then click 'ok'.

Rate the employee’s performance relative to time in position by checking the most appropriate rating. Make an explanatory comment to support your rating, and where possible cite specific examples of behavior that led to the rating. When performance does not meet expectations, list specific goals for improvement and the date you expect them to be achieved.

Not Applicable	Does Not Meet Expectations	Meets Expectations	Exceeds Expectations	Comments
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Job Knowledge: The extent to which the employee is familiar with policies and procedures applicable to the position and able to work independently.

Productivity: The volume of acceptable work produced. Ability to organize and prioritize work; utilize time well and fully meet deadlines.

Quality: The ability to complete work accurately and neatly to meet quality standards.

Responsibility/Initiative: Acceptance and fulfillment of work assignments, leadership, intelligent decision making.

Relationships: The ability to establish and maintain effective relationships with others with whom interaction is required in the performance of the position.

Adaptability/Resourcefulness: The ability to adjust to change with a minimum of disruption to productivity. Ability to contribute useful ideas for improved performance of the position.

Reliability: Arrives to work on time prepared to achieve goals. Viewed as responsible and reliable among peers. Understands how individual tasks and responsibilities contribute to the Unit as a whole.

**Not
Applicable**

**Does Not Meet
Expectations**

**Meets
Expectations**

**Exceeds
Expectations**

Comments

Supervisory Skills: The ability to get effective results from others.

Overall Evaluation

Comments by Immediate Supervisor. (Please include (a) rationale for your overall evaluation, (b) key strengths of the employee, (c) any ways in which the employee needs to improve, and (d) what the employee has accomplished during this review period to prepare for greater effectiveness in the present position and/or prepare for more responsibility. Add extra sheets if necessary.)

In the upcoming review period, what should this employee do to develop greater effectiveness in the current position and/or prepare for greater responsibilities? (Consider coursework, self study, reading materials, etc.) Also, collaborate with this employee to list any goals/objectives for the upcoming year.

Name: _____ Signature: _____

Title: _____ Date: _____

Comments by Appraised Employee. My performance has been discussed with me as described in this appraisal. (Please feel free to add any comments you have concerning your performance, your development, or your review. Add extra sheets as necessary.)

Name: _____ Signature: _____

Title: _____ Date: _____
