 Office of Human Resources **To fill form, click where it says ‘Click Here’ and insert text**

 435.797.0216

**PERFORMANCE APPRAISAL**

Name: Click Here A#: Click Here Review Period: Click Here

Position Title: Click Here Department: Click Here

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| ***Essential Functions/Responsibilities*** |
| **Responsibility #1** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [x]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #2** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #3** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #4** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #5** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #6** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #7** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Responsibility #8** Percent of Time: Click Here*Description*:Click Here *Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments: (Provide an explanation/example of your evaluation, required at the Expert level)*Learner [ ]  Doer [ ]  Midpoint [ ]  Master [ ]  Expert [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |

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| ***Performance Roles*** |
| **Job Knowledge/Career Role:** Evaluate the employee based on job knowledge to increase knowledge and develop new skills or abilities that contribute to increased departmental effectiveness, capacity, service, or proficiency.*Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments:(Provide an explanation/example of your evaluation, required at the Outstanding level)*Needs Improvement [ ]  Meets Expectations [ ]  Midpoint [ ]  Exceeds Expectations [ ]  Outstanding [ ]  Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Team Role:** Evaluate the employee based on contributions to developing and maintaining a cooperative team within their workgroup or department. Consider supporting other employees, fostering cooperation with other employees, contributing in team/staff meetings in a productive way, mentoring employees, volunteering for additional assignments, etc.*Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments:(Provide an explanation/example of your evaluation, required at the Outstanding level)*Needs Improvement [ ]  Meets Expectations [ ]  Midpoint [ ]  Exceeds Expectations [ ]  Outstanding [ ]  Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Innovator/Initiative Role:** Evaluate the employee based on ability to identify areas that can be changed to make the organization more productive or effective in achieving performance objectives. Areas to consider are ability to identify areas to improve, ability to analyze situations, ability to develop thoughtful and creative solutions/processes, willingness to engage in improvement and change activities, and implementation.*Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments:(Provide an explanation/example of your evaluation, required at the Outstanding level)*Needs Improvement [ ]  Meets Expectations [ ]  Midpoint [ ]  Exceeds Expectations [ ]  Outstanding [ ]  Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **Communication Role:** Evaluate the employee ability to communicate verbally and in writing in a clear and concise way with others. Areas to consider are ability to verbally convey ideas, thoughts, issues, information in any required context including one on one, small groups, large groups, and presentations. Also consider their practices in providing timely communications to internal and external audiences. If required consider ability to express and communicate in writing.*Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments:(Provide an explanation/example of your evaluation, required at the Outstanding level)* Needs Improvement [ ]  Meets Expectations [ ]  Midpoint [ ]  Exceeds Expectations [ ]  Outstanding [ ] Click HereFailed to meet expectations Yes [ ]  No [ ]  |
| **University Leadership Role:** Evaluate the employee based on behavioral citizenship and contributions to the efficient operation of the department/university. Consider willingness to assist outside of specific areas of responsibility, giving suggestions for improving conditions within the department, attitude, attendance, engagement, complying with departmental and university policies, serving on departmental and/or university committees, etc.*Highlights/Accomplishments: (completed by employee and/or supervisor)*Click Here*Supervisor Evaluation/Comments:(Provide an explanation/example of your evaluation, required at the Outstanding level)*Needs Improvement [ ]  Meets Expectations [ ]  Midpoint [ ]  Exceeds Expectations [ ]  Outstanding [ ] Click Here Failed to meet expectations Yes [ ]  No [ ]   |

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| ***Goals*** |
| Employee Development Goals and Training Plans, Current year Click Here |
| *Goal* Click Here  | Training Source Click Here  | Anticipated Completion Date Click Here |
| *Highlights/Accomplishments: (completed by employee and/or supervisor)* Click Here  |  |  |

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| Employee Development Goals and Training Plans, Next year Click Here |
| *Goal* Click Here  | Training Source Click Here  | Anticipated Completion Date Click Here  |
| *Highlights/Accomplishments: (completed by employee and/or supervisor)* Click Here  |  |  |
| Overall Employee Comments: |
|  Click Here  |

\*Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title: ­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Signature does not indicate that an employee is in agreement with the performance assessment. It is an acknowledgement that the performance appraisal was conducted and the employee received a copy of the appraisal.

Rev. (3/15/15)