





**PROFESSIONAL STAFF  
PERFORMANCE APPRAISAL FORM**

Name \_\_\_\_\_ Title \_\_\_\_\_  
Dept \_\_\_\_\_  
Evaluation Period \_\_\_\_\_ Appraisal Date: \_\_\_\_\_

**Instructions**

The evaluation is divided into ten sections to be completed as follows:

Part I, Part IV, Part V (a), Part V (b), Part V (c) (at the employee's option), Part VI, Part VIII are to be completed by the Supervisor.

Part II, Part III, Part VII are to be completed by the Employee.

**Part I. Summary of Job Responsibilities (Brief Job Description)**

To be completed by the supervisor. List the major responsibilities associated with the position.

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**Part II: Accomplishments** To be completed by the employee. Discuss your accomplishments given your actual job responsibilities in Part I and the goals and objectives from Part V(b) of last year's evaluation.

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**Part III: Employee Self Assessment** To be completed by the employee. Please evaluate your overall strengths and areas in which you would like to see professional growth as an employee, in the context of your job responsibilities and stated goals and objectives. It is recommended that the narrative be no more than two pages.

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**Part IV: Rating Factors Used** To be completed by the supervisor.

- O - OUTSTANDING (PERFORMANCE EXCEEDS THE EXPECTED QUALITY REQUIRED FOR THE POSITION)**
- C - COMPETENT (PERFORMANCE IS CONSISTENTLY UP TO OR SOMEWHAT ABOVE THE EXPECTED QUALITY REQUIRED FOR THE POSITION)**
- I - IMPROVEMENT NEEDED (PERFORMANCE IS AT MINIMUM STANDARDS: ADDITIONAL EFFORT IS NEEDED FOR IMPROVEMENT)**
- U - UNSATISFACTORY (PERFORMANCE IS INADEQUATE)**
- N - NOT APPLICABLE**

**NOTE: One column in each category must be checked.**

	<b>O</b>	<b>C</b>	<b>I</b>	<b>U</b>	<b>N</b>
<b>1. ATTITUDE TOWARDS CO-WORKERS -</b> Consider cooperativeness, receptivity, sincerity, dedication and motivation. <b>COMMENTS:</b>					
<b>2. SERVICE PROFESSIONALISM -</b> Consider cooperativeness, cheerfulness, tactfulness, and rapport. Consider manner in which the employee provides consistent, accurate, and timely service to prospective and current students, parents, and colleagues. <b>COMMENTS:</b>					
<b>3. STAFF/STUDENT RELATIONS -</b> Consider manner in which the employee engages, motivates, supervises, and effectively works with students. <b>COMMENTS:</b>					
<b>4. DEPENDABILITY -</b> Consider manner in which the employee works, applies himself/herself and completes assignments on time; attendance at meetings; promptness in reporting for and starting work. <b>COMMENTS:</b>					
<b>6. QUALITY OF WORK/JOB PERFORMANCE -</b> Consider the manner in which responsibilities of the job are met.					

		O	C	I	U	N
	<b>COMMENTS:</b>					
7.	<b>INITIATIVE - INNOVATION AND CREATIVITY -</b> In development of tasks, projects and objectives, consider manner in which the employee makes work improvements, offers suggestions, and lends assistance to co-workers. <b>COMMENTS:</b>					
8.	<b>RESPONSE TO SUPERVISION -</b> Consider manner in which employee is responsive to authority, instruction, guidance, correction and discipline. <b>COMMENTS:</b>					
9.	<b>JUDGMENT/DECISION MAKING -</b> Consider manner in which the employee identifies and analyzes problem areas and plans effective solutions. <b>COMMENTS:</b>					
10.	<b>COMMUNICATION -</b> Consider manner in which the employee expresses ideas, opinions, and information clearly and accurately, both orally and in writing. <b>COMMENTS:</b>					
11.	<b>GROWTH POTENTIAL-</b> Consider potential for future growth and advancement. <b>COMMENTS:</b>					
12.	<b>JOB KNOWLEDGE -</b> Displays and applies knowledge of job and remains current in the field. <b>COMMENTS:</b>					
13.	<b>PRODUCTIVITY -</b> Completion of assigned tasks and projects. Attains goals and Objectives. <b>COMMENTS:</b>					
14.	<b>SERVICE TO THE UNIVERSITY -</b> Consider contributions or efforts beyond generally assigned responsibilities. <b>COMMENTS:</b>					

**Part V: (a) Performance Development Plan** (Required) To be completed by the supervisor. If the employee ratings indicate improvement needed (I) or unsatisfactory (U) the supervisor must address these areas in this section.

The employee's performance development plan should focus on specific structured strategies for performance improvement. The plan should be congruent with annual goals and objectives of his/her area/unit. Use additional space or attach a separate page if necessary. To be completed by the supervisor after consultation with the employee.

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**Part V: (b) Summary of Goals and Objectives for upcoming year** (Required) To be completed by the supervisor.

Include goals, objectives, and timelines for completion for the upcoming evaluation period. Using the Student Success Plan as a context for this performance assessment, consider (a) goals and objectives of the unit, and (b) priority areas: *Academic Excellence, Information Technology, Diversity, and Student Success*. Use additional space if necessary. To be completed by the supervisor after consultation with the employee.

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**Part V: (c) Professional Growth/Career Development Plan** (At the Employee's Option) To be completed by the supervisor in consultation with the employee.

The employee and the supervisor should discuss the employee's career development and professional growth goals and how the supervisor/University can assist the employees with these goals. The professional development plan should focus on the employee's personal professional development goals in relation to the plans for the area/unit or the employee's short-term/long-term career goals. This section should be completed by the supervisor and the employee at the employee's option. This section is solely for the benefit of the employee and therefore, the employee will not be assessed in this area in any upcoming evaluations.

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**Part VI: Recommendation of Evaluator** To be completed by supervisor.

- Reappointment with highest commendation
- Reappointment with no reservations
- Reappointment with reservations/conditions- state reservations/conditions in Comments section below.
- Non reappointment- state rationale in Comments section below.
- Not applicable (For candidates on multi-year contracts and temporary employees not undergoing reappointment consideration)

Comments: (use additional space if necessary)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

**Part VII: Employee Review** To be completed by the employee only after discussion with the supervisor has taken place.

This section is to be used to:

- (a) confirm receipt of the evaluation and confirm that discussion has taken place
- (b) make comments on Evaluator's Assessment

I am in general agreement with overall performance assessment

I am in general disagreement with overall performance assessment.

Comments: (use additional space, or attach a separate page, if necessary)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

**Part VIII: Recommendation of Intermediate Supervisor (If any)**

- Reappointment with highest commendation
- Reappointment with no reservations
- \*Reappointment with reservations/conditions- state reservations/conditions in Comments section below.
- \*Non reappointment- state rationale in Comments section below.
- Not applicable (For candidates on multi-year contracts and temporary employees not undergoing reappointment consideration)

Comments: (use additional space if necessary)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

**Part IX: Review by Senior University Officer**

- Reappointment with highest commendation
- Reappointment with no reservations
- \*Reappointment with reservations/conditions- state reservations/conditions in Comments section below.
- \*Non reappointment-state rationale in Comments section below.
- Not applicable (For candidates on multi-year contracts and temporary employees not undergoing reappointment consideration)

Comments: (use additional space if necessary)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

\* If recommendations or comments/rationale differ from those at the previous level of review, the form must be provided to the employee. The candidate's response, if any, should be forwarded to the next level of review for consideration.

**Part X: Review by Provost/President**

- Reappointment with highest commendation
- Reappointment with no reservations
- \*Reappointment with reservations/conditions-state reservations/conditions in Comments section below.
- \*Non reappointment- state rationale in Comments section below.
- Not applicable (For candidates on multi-year contracts and temporary employees not undergoing reappointment consideration)

Comments: (use additional space if necessary)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

\* If recommendations or comments/rationale differ from those at the previous level of review, the form must be provided to the employee. The candidate's response, if any, should be forwarded to the next level of review for consideration.