

EMPLOYEE PERFORMANCE EVALUATION FORM

Name _____ Department _____

Position _____ Supervisor _____

Period of Review _____ Date of Review _____

From _____ to _____

INSTRUCTIONS FOR SUPERVISOR

Review the performance levels listed under the Rating Guide and apply the appropriate rating to each Performance Category, recording your comments in the narrative section that follows. Comments should be used to explain ratings and make specific suggestions for improvement or development, as well as reinforcing good performance. The employee's position description should be used as a reference in evaluating the performance categories listed.

RATING GUIDE

1. **Below Expectations:** Performance was unacceptable during the appraisal period; did not meet the requirements of the position.
2. **Meets Expectations:** Met major requirements during the appraisal period; was consistently effective and competent; achieved the results expected.
3. **Exceeds Expectations:** Highly superior performance during the appraisal period; work was characterized by unusually difficult or superior accomplishment; employee significantly and consistently performed at a level well above that expected.

PERFORMANCE CATEGORIES

1. **Quality of Work** (Meets established standards for the position; work is accurate and thorough)

Rating: _____

Comments:

2. **Productivity** (Produces relative to time and resources used; maintains level of efficiency)

Rating: _____

Comments:

3. **Reliability** (Consistently meets deadlines; conforms to attendance policies; adapts to work demands)

Rating: _____

Comments:

4. **Initiative** (Readily offers ideas to improve work processes; identifies problems and proposes solutions)

Rating: _____

Comments:

5. **Interpersonal relationships** (Displays ability to work and cooperate with others in manner consistent with position and workflow requirements)

Rating: _____

Comments:

6. **Other** (The supervisor may list and rate a specific area(s) important to the department.)

Performance Category:

Rating: _____

Comments:

7. Achievement of Goals Set in Last Performance Review

Rating: _____

Comments:

OVERALL RATING: (This area considers the rating in each category, the relative importance of each for the position, and the performance against established goals and objectives for the position.)

Rating: _____

Comments:

Goals and Objectives for Coming Year:

Additional Comments of Supervisor:

Comments of Employee: (use reverse side or attachment if necessary)

Supervisor's Signature _____

Date _____

Employee's Signature* _____

Date _____

**Signifies employee has read and understood this document, not necessarily that he or she agrees with its contents.*