

CAREER PERSONNEL PERFORMANCE REVIEW

EMPLOYEE NAME:	PID NUMBER:	EVALUATION PERIOD: FROM April 1, 2009 to March 31, 2010
JOB TITLE:	DIVISION/DEPARTMENT:	

CIRCLE ONE: 2 MONTH 6 MONTH ANNUAL SIGNIFICANT INCIDENT FOLLOW-UP FINAL

REVIEW THIS ENTIRE FORM AND DETERMINE AN OVERALL RATING FOR THIS EMPLOYEE: (CIRCLE ONE)

SUPERIOR EXCELLENT SATISFACTORY UNSATISFACTORY PROBATIONARY

<u>EVALUATOR'S INSTRUCTIONS:</u>	MARK THE BOX TO THE LEFT OF THE STATEMENT THAT BEST DESCRIBES YOUR RATING OF THE EMPLOYEE.	COMMENTS:
EVALUATE EMPLOYEE ON EACH FACTOR AS HONESTLY AS POSSIBLE		
<u>KNOWLEDGE OF JOB:</u> CONSIDER THE EMPLOYEE'S UNDERSTANDING OF ALL PHASES OF HIS/HER WORK AND RELATED MATTERS NECESSARY FOR FULL JOB PERFORMANCE.	<input type="checkbox"/> HAS SUPERIOR KNOWLEDGE/UNDERSTANDING OF JOB <input type="checkbox"/> HAS THOROUGH KNOWLEDGE/UNDERSTANDING OF JOB <input type="checkbox"/> HAS GOOD WORKING KNOWLEDGE OF MOST ASPECTS OF JOB <input type="checkbox"/> HAS LIMITED KNOWLEDGE OF JOB AND RELATED FUNCTIONS <input type="checkbox"/> HAS MINIMUM KNOWLEDGE OF JOB ---- NEEDS TRAINING	<hr/> <hr/> <hr/> <hr/> <hr/>
<u>QUALITY OF WORK:</u> CONSIDER NEATNESS, THOROUGHNESS AND ACCURACY OF COMPLETING ASSIGNMENTS. APPRAISE THE EMPLOYEE'S STANDARDS OF QUALITY.	<input type="checkbox"/> WORK IS VERY ACCURATE AND VERY COMPLETE <input type="checkbox"/> PRODUCES HIGH QUALITY WORK WITH ALMOST NO ERRORS <input type="checkbox"/> WORK IS SATISFACTORY -- ERRORS ARE FEW IN NUMBER <input type="checkbox"/> MEETS MINIMUM STANDARDS -- IMPROVEMENT DESIRABLE <input type="checkbox"/> RARELY MEETS MINIMUM STANDARDS -- NEEDS MUCH IMPROVEMENT	<hr/> <hr/> <hr/> <hr/> <hr/>
<u>QUANTITY OF WORK:</u> CONSIDER THE AMOUNT OF ACCEPTABLE WORK PRODUCED AND THE PROMPTNESS BASED ON SPECIFIC JOB REQUIREMENTS.	<input type="checkbox"/> EXCEPTIONAL AMOUNT OF WORK COMPLETED <input type="checkbox"/> VERY INDUSTRIOUS -- PRODUCES MORE THAN IS EXPECTED <input type="checkbox"/> ABOVE AVERAGE PRODUCTION -- VOLUME SATISFACTORY <input type="checkbox"/> MEETS MINIMUM PRODUCTION REQUIREMENTS <input type="checkbox"/> PRODUCES LESS THAN IS REQUIRED	<hr/> <hr/> <hr/> <hr/> <hr/>



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Employee Name: _____

PID _____

2/3

DEPENDABILITY:

CONSIDER RELIABILITY AND WILLINGNESS OF EMPLOYEE IN FOLLOWING INSTRUCTIONS AND CARRYING OUT ASSIGNED TASKS WITH A MINIMUM OF DIRECT SUPERVISION. DO YOU HAVE CONFIDENCE THE JOB WILL BE DONE CONSCIENTIOUSLY?

- CONSCIENTIOUS AND DEPENDABLE IN ALL WORK; REQUIRES VERY LITTLE SUPERVISION.
- CONSCIENTIOUS; ACCEPTS RESPONSIBILITY BEYOND ROUTINE; MINIMUM SUPERVISION NEEDED.
- RELIABLE AND ATTENTIVE TO WORK ASSIGNED; ACCEPTS RESPONSIBILITY DESIGNATED BY SUPERVISOR
- MEETS MINIMUM STANDARDS; NEEDS FREQUENT FOLLOW-UP; HAS DIFFICULTY ACCEPTING RESPONSIBILITY
- REQUIRES CLOSE, CONSTANT SUPERVISION; REFUSES TO ACCEPT RESPONSIBILITY

INITIATIVE:

THIS FACTOR IS CONCERNED WITH RESOURCEFULNESS AND SELF-RELIANCE. CONSIDER ABILITY TO DEVELOP NEW IDEAS, DESIRE TO ATTAIN GOALS, TO ACHIEVE. IS EMPLOYEE SELF-STARTER?

- TAKES INITIATIVE-- CREATIVE, SELF-RELIANT, EXCELS
- RESOURCEFUL; PLANS ORDER OF WORK WELL
- WORKS STEADILY -- OCCASIONALLY SUBMITS NEW IDEAS
- SETS GOALS TOO LOW -- FREQUENTLY NEEDS PRODDING
- SHOWS LITTLE INITIATIVE -- MUST BE TOLD WHAT TO DO

JUDGMENT:

CONSIDER THE INTELLIGENCE AND THOUGHT USED IN MAKING DECISIONS. DOES EMPLOYEE DEMONSTRATE ABILITY TO THINK AND ACT CALMLY, LOGICALLY, AND RAPIDLY UNDER STRESS?

- MAKES DECISIONS BASED ON SOUND REASONING /JUDGMENTS
- USES GOOD DECISION-MAKING SKILLS
- JUDGMENT DEPENDABLE ON MATTERS OF ROUTINE NATURE
- DEMONSTRATES CONSIDERABLE DIFFICULTY IN MAKING DECISIONS
- POOR SENSE OF JUDGMENT - DECISIONS OFTEN UNSOUND

COOPERATION:

THIS FACTOR APPRAISES EMPLOYEE'S ABILITY TO FIT INTO THE ORGANIZATION AND WORK IN HARMONY WITH HIS/HER SUPERVISOR, FELLOW EMPLOYEES, STUDENTS, AND THE GENERAL PUBLIC. IS THE EMPLOYEE CONGENIAL AND COOPERATIVE?

- DISPLAYS INTEGRITY, LEADS OTHERS, INSPIRES CONFIDENCE
- VERY COOPERATIVE, TACTFUL, OBLIGING -- SETS GOOD EXAMPLE
- USUALLY CONGENIAL AND HELPFUL -- GOOD TEAM WORKER
- GENERALLY DOES NOT RELATE WELL TO OTHERS
- OFTEN TACTLESS, QUARRELSOME -- CAUSES FRICTION

PUNCTUALITY:

THIS FACTOR IS CONCERNED WITH EMPLOYEE'S PUNCTUALITY.

- ALWAYS PUNCTUAL
- SELDOM LATE
- OCCASIONALLY LATE
- FREQUENTLY LATE
- EXCESSIVELY LATE

ATTENDANCE:

THIS FACTOR IS CONCERNED WITH EMPLOYEE'S ATTENDANCE.

- ALWAYS PRESENT
- SELDOM ABSENT
- OCCASIONALLY ABSENT
- FREQUENTLY ABSENT
- EXCESSIVE ABSENCES



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Employee Name: _____

PID: _____

3/3

INSTRUCTIONS: IN THE "COMMENTS" SECTION, THE EVALUATOR IS ENCOURAGED TO CONSIDER AMONG OTHER THINGS PARTICULAR STRENGTHS OR CAREER PREPARATION THAT MAY PREPARE THE EMPLOYEE FOR FUTURE GROWTH OPPORTUNITIES, WEAKNESSES THAT MIGHT HINDER FUTURE GROWTH IF NOT ADDRESSED, AND WAYS THAT THE EMPLOYEE AND SUPERVISOR MAY CONTRIBUTE TO MORE EFFECTIVE PERFORMANCE BY THE EMPLOYEE. IF NECESSARY, ADDITIONAL COMMENTS SHOULD BE ATTACHED ON A SEPARATE SHEET OF PAPER.

EVALUATOR'S COMMENTS:

EVALUATOR:

TITLE:

DATE:

EMPLOYEE'S COMMENTS:

A DRUG-FREE CAMPUS AWARENESS PROGRAM BROCHURE ACCOMPANIES THE ANNUAL PERFORMANCE REVIEW FORM. I UNDERSTAND THAT IF I HAVE ANY QUESTIONS OR DO NOT UNDERSTAND ANY PART OF THE MATERIAL I MAY CONTACT THE HUMAN RESOURCES OFFICE FOR ASSISTANCE.

EMPLOYEE INSTRUCTIONS: PLACE A MARK ON THE LINE BESIDE THE APPROPRIATE PHRASE.

I HAVE REVIEWED THIS EVALUATION WITH MY SUPERVISOR AND **IDO** ___ **DO NOT** ___ CONSIDER IT A FAIR AND ACCURATE ASSESSMENT OF MY PERFORMANCE FOR THE EVALUATION PERIOD. (ANY AREAS OF DISAGREEMENT MUST BE EXPLAINED ON AN ATTACHED SHEET OF PAPER.)

EMPLOYEE'S SIGNATURE

DATE