**Purpose:** The purpose of this assessment form is to document an employee’s job performance and allow a supervisor to provide feedback to an employee regarding various job duties whereas there has been a recent change in supervisor and/or an employee has been promoted or newly hired in a department. The assessment form is typically used when the rating period is less than a year **and** the supervisor cannot adequately complete an annual evaluation due to the employee's partial time period in the department during a regular annual evaluation period.

**Notes to Supervisor:** The supervisor should refer to the employee's job description when completing the assessment form; the assessment should focus on the employee's ability to perform the job duties listed in the job description. Select the rating which most closely reflects the employee’s performance. Consider each factor separately and independently. Consider the employee’s work performance during the entire review period. Do not base your rating on only one or two occurrences.

**Employee’s Name:** Click here to enter employee’s name.

**Employee’s Title:** Click here to enter employee’s title.

**Supervisor's Name:** Click here to enter supervisor's name.

**Rating Period:** Click here to enter rating period.

| **Performance Factor**  | **Rating:****(acceptable, unacceptable or not applicable)** |
| --- | --- |
| **Job Knowledge:*** Demonstrates professional knowledge and skills essential to meet responsibilities
* Shows initiative in learning new/related job skills
* Integrates new tasks and priorities into existing responsibilities
 | Choose a rating. |
| **Planning and Organizing:*** Budgets time and priorities work assignments in order to accomplish goals
* Performs what has been planned in an organized and efficient manner
 | Choose a rating. |
| **Problem Solving & Decision Making:*** Obtains and analyzes facts to make sound decisions in a timely matter
* Identifies and anticipates problems and changes, and uses practical judgment to formulate solutions to problems
 | Choose a rating. |
| **Resource Management & Budget Control:*** Plans and allocates the University’s resources efficiently and effectively to accomplish goals
* Recognizes potential savings and adjusts practices to utilize resources effectively
 | Choose a rating.  |
| **Teamwork & Interpersonal Relations:*** Actively develops cooperative relationships with faculty and staff, fostering support for all constituencies
* Shows willingness to take on additional assignments as needed
* Contributes to departmental and interdepartmental projects priorities
 | Choose a rating. |
| **Communication:*** Express instructions, ideas and information clearly and directly in oral and or written form
* Uses effective listening skills
 | Choose a rating. |
| **Initiative and Accountability:*** Identifies and seeks new ways to enhance services and controls, and takes appropriate action
* Accepts professional responsibility and accountability for all assignments
* Reacts promptly to issues raised
 | Choose a rating. |
| **Managerial Skills:*** Delegates responsibility while supervising and evaluating employees fairly
* Trains, motivates and develops subordinates
* Resolves conflicts equitably and in a timely manner
* Provides leadership while encouraging staff morale, teamwork and cooperation
 | Choose a rating. |

**Supervisor's Comments:** Click here to enter comments.

**Employee's Comments:**

**Professional Development Plan:**

This section is to be completed jointly by the supervisor and employee after discussing performance ratings. Decide on three to five areas of performance on which the employee will concentrate during the next review period. Specify any needed training, job coaching or self-study which will support the employee in accomplishing his or her goals (Additional sheets may be attached).

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| Development Plan | Target Dates |
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**Certifications:**

**Comments to Supervisor and Employee:** The supervisor should discuss the assessment results with the employee. At a minimum, employees must be given a copy of the assessment for his/her records. Both the supervisor and the employee should sign the assessment form. The employee's signature indicates only that the employee received a copy of the assessment form. It does not necessarily signify employee concurrence. Both employee and supervisor are strongly encouraged to include written comments. At the assessment meeting, after the employee signs the form, the supervisor should give one copy to the employee, retain one copy for department files and forward one copy to the Office of Human Resources.

I hereby certify that this report constitutes my best judgment of the performance of this employee, and is based on personal observation and knowledge of his/her work.

**Supervisor**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that I have personally reviewed this report, and understand that my signature does not imply agreement or disagreement.

**Employee**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_

Cc: Employee's Personnel File