



**Administrative and Supervisory Staff Performance Review
Performance Period 1/1/2023-12/31/2023**

Directions

1. The employee should write a self-review and submit to their supervisor by 12/23/2022.
2. The Supervisor is to write a narrative answer and apply a rating for each topic. Overall rating is based on the average rating (total score/9)
3. Each answer should be typewritten with adequate spacing.
4. Each sheet must include the employee's name, date and criteria being discussed.
5. Upon completion, the supervisor reviews the document with their boss.
6. The supervisor meets with the employee to discuss it.
7. After discussion, the supervisor signs and submits the document to the employee.
8. The employee has three (3) days to review it and respond, in writing.
9. The employee then signs the evaluation and returns it to the supervisor.
10. The appropriate Dean/Executive Director then reviews and signs it (if not the reviewer)
11. The document is returned to Human Resources, which verifies completion, signatures, etc. All Reviews are due to Human Resources by 2/28/2022.
12. HR logs and files all evaluations.

Criteria

1. **Job Knowledge:** Competence in his/her specialty/field.
2. **Productivity:** Quality and quantity of work.
3. **Self-Management and Related Factors:** Critical thinking and decision making, interpersonal relations, attitude and cooperation, initiative and resourcefulness and his/her personal development.
4. **Composure:** The extent to which the employee maintains effective performance under pressure, copes effectively and develops effective approaches to deal with pressure or stress. Presents a positive disposition and maintains constructive interpersonal relationships when under stress.



5. **Service & Relationships:** the extent to which the employee’s behaviors are directed toward fostering positive working relationships in a diverse workplace, respect for one’s fellow workers, and cooperation with students, customers and visitors.

6. **Adaptability & Flexibility:** the extent to which the employee exhibits openness to new ideas, programs, systems and/or structures.

7. **Operations Management:** the ability to plan, manage and organize, as well as their problem solving and delegation skills.

8. **Human Resources Management:** Leadership, staff development and performance feedback. Discussion about how the employee practices equal employment opportunity to assure compliance with applicable legislation/regulations.

9. **Performance Objectives and Development Plan (Arrived at Jointly):** Discussion of strengths and a plan outline for development covering specific training needs, professional development courses, self-development and other approaches which will help the employee in accomplishing their job responsibilities. Include any training and/or development courses completed during this performance review period.

10. **Employee Feedback Page:** Response to the overall evaluation.

| DOES NOT MEET EXPECTATIONS | | MEETS EXPECTATIONS | | FAR EXCEEDS EXPECTATIONS | |
|----------------------------|--|--------------------|---|--------------------------|--|
| 1 | 2 | 3 | 4 | 5 | |
| Rating | Description | | | | |
| 5 | Performance greatly and consistently exceeds expectations. Employee consistently goes beyond job requirements to achieve positive results. Performance is exemplary. No areas of performance improvement identified. | | | | |
| 4 | Performance exceeds expectations most of the time. Employee often goes beyond job requirements to achieve results. Performance is significantly above average. No significant areas of performance improvement identified. | | | | |
| 3 | Performance meets all minimum expectations. Performance is satisfactory. Some areas of performance improvement are identified. | | | | |
| 2 | Performance meets some, but not all expectations. Performance lacks in one or more critical components of the position. Improvement is necessary. A Work Improvement Plan needs to be developed. | | | | |
| 1 | Performance fails to meet expectations or lacks in critical areas. A Work Performance Plan is required for this employee. | | | | |

Overall Rating: _____



Employee's Comments:

I have reviewed this report on the date indicated and have had the opportunity to discuss it with my supervisor and make comments. My signature does not necessarily mean that I agree with this review.

Employee's Signature

Date

Supervisor

Date

Cabinet Member

Date

Director, Human Resources

Date

Please return the completed, signed evaluation to Human Resources.

Copy: Personnel file