

# Performance Appraisal

Employee Name \_\_\_\_\_ Title \_\_\_\_\_

Department \_\_\_\_\_ Social Security Number \_\_\_\_\_

Reason for Review:     Annual                       Promotion                       Unsatisfactory Performance  
                                   Merit                               End of Probation Period                       Other \_\_\_\_\_

Date employee began present position \_\_\_\_\_ Date of last appraisal \_\_\_\_\_ Scheduled appraisal date \_\_\_\_\_

**Instructions:** Carefully evaluate employee's work performance in relation to current job requirements. Check rating box to indicate the employee's performance. Indicate N/A if not applicable. Assign points for each rating within the scale and write that number in the corresponding points box. Points will be totaled and averaged for an overall performance score.

## DEFINITION OF PERFORMANCE RATINGS

**O – Outstanding** – Performance is exceptional in all areas and is recognizable as being far superior to others.

**V – Very Good** – Results clearly exceed most position requirements. Performance is of high quality and is achieved on a consistent basis.

**G – Good** – Competent and dependable level of performance. Meets performance standards of the job.

**I – Improvement Needed** – Performance is deficient in certain areas. Improvement is necessary.

**U – Unsatisfactory** – Results are generally unacceptable and require immediate improvement. No merit increase should be granted to individuals with this rating.

**N/A – Not Applicable** or too soon to rate.

GENERAL FACTORS	RATING	SCALE	POINTS	SUPPORTIVE DETAILS OR COMMENTS
<b>1. Quality</b> – The extent to which an employee's work is accurate, thorough and neat.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>2. Productivity</b> – The extent to which an employee produces a significant volume of work efficiently in a specified period of time.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>3. Job Knowledge</b> – The extent to which an employee possesses the practical/technical knowledge required on the job.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>4. Reliability</b> – The extent to which an employee can be relied on upon regarding task completion and follow up.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>5. Availability</b> – The extent to which an employee is punctual, observes prescribed work break/meal periods and has an acceptable overall attendance record.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>6. Independence</b> – The extent to which an employee performs work with little or no supervision.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____

GENERAL FACTORS	RATING	SCALE	POINTS	SUPPORTIVE DETAILS OR COMMENTS
<b>7. Creativity</b> – The extent to which an employee proposes ideas, finds new and better ways of doing things.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>8. Initiative</b> – The extent to which an employee seeks out new assignments and assumes additional duties when necessary.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>9. Adherence to Policy</b> – The extent to which an employee follows safety and conduct rules, other regulations and adheres to company policies.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>10. Interpersonal Relationships</b> – The extent to which an employee is willing and demonstrates the ability to cooperate, work and communicate with co-workers, supervisors, subordinates and/or outside contacts.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____
<b>11. Judgement</b> – The extent to which an employee demonstrates proper judgement and decision-making skills when necessary.	O <input type="checkbox"/> V <input type="checkbox"/> G <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	100 – 90 89 – 80 79 – 70 69 – 60 Below 60		_____ _____

Rate employee's overall performance in comparison to position duties and responsibilities.

- Outstanding 100 – 90 %
- Very Good 89 – 80 %
- Good 79 – 70 %
- Improvement Needed 69 – 60%
- Unsatisfactory – Below 60%

Total Points \_\_\_\_\_ ÷ Number of Factors Rated \_\_\_\_\_ = \_\_\_\_\_ Overall Rating

Complete all the following sections.

1. Accomplishments or new abilities demonstrated since last review: \_\_\_\_\_

\_\_\_\_\_

2. Specific areas of improvement needed: \_\_\_\_\_

\_\_\_\_\_

3. Recommendations for professional development (seminars, training, schooling, etc.): \_\_\_\_\_

\_\_\_\_\_

4. Absences: Number of incidents \_\_\_\_\_ Number of days \_\_\_\_\_

Employee Comments: \_\_\_\_\_

\_\_\_\_\_

Discussed with individual on \_\_\_\_\_ Employee's Signature\* \_\_\_\_\_

• If employee disagrees with the appraisal, he/she may attach appropriate comments

Follow-up requested/desired:  Yes  No Follow-up date \_\_\_\_\_

Evaluator's Signature \_\_\_\_\_ Date \_\_\_\_\_