



PERFORMANCE REVIEW FORM

Full-Time & Part-Time Administrative, Technical, and Supervisory Staff

Performance Management is the ongoing process through which managers work with individual employees to plan, support, and improve the employee's on the job performance.

NAME: _____

DIVISION: _____

POSITION TITLE: _____

SUPERVISOR: _____

STATUS: () Part-Time () Full-Time () Probationary

This reviews performance for the period: From _____ To: _____

OVERALL ASSESSMENT OF PERFORMANCE

- E – EXCELLENT: Significantly and consistently exceeded the standard 5 Points
- V – VERY GOOD: Exceeded the standard 4 Points
- S – SATISFACTORY: Met the standard 3 Points
- ID – IMPROVEMENT DESIRED: Did not meet the standard 2 Points
- IE – IMPROVEMENT ESSENTIAL: Significantly below the standard 1 Point
- N/A – NOT APPLICABLE: Component not included in everyday duties N / A

This performance appraisal has been reviewed with me and I have received a copy.

Employee's signature _____ Date: _____

This performance appraisal has been completed by me and reviewed with the employee.

Supervisor's Signature: _____ Date: _____

Once completed, discussed and all signatures obtained, the original of this form is to be forward to the Human Resources Department for retention in the employee's personnel file.

Contribution Checklist Technical Competence		Excellent	Very Good	Satisfactory	Improvement Desired	Improvement Essential	N / A
JOB KNOWLEDGE AND ACHIEVEMENT							
1	Understands Job Methods and Procedures						
2	Plans work assignments						
3	Optimizes use of available resources						
4	Establishes Priorities Appropriately						
5	Work is thorough and accurate						
6	Minimizes Controllable Costs						
7	Works in an organized manner						
8	Produces appropriate amount of quality work for time spent						
9	Works in a safe manner						
10	Adheres to applicable legislation / regulations and policies, procedures, standards and guidelines						
11	Resolves problems / enquiries promptly and effectively						
12	Expresses self clearly and concisely						
13	Produces high quality written correspondence						
14	Keeps supervisor informed						
ATTITUDE / INITIATIVE							
15	Manages time effectively						
16	Ability to suggest and / or take action independently						
17	Has minimal absenteeism. Arrives and starts on time.						
18	Is flexible / adaptable to change and new / conflicting priorities						
19	Stays abreast of new technology / trends in job						
20	Is innovative; identifies new / better ways to achieve results						
21	Regularly meets objectives						
22	Demonstrates ownership and commitment to job						
23	Shows pride and professionalism in work						
24	Accepts special assignments positively						
25	Works co-operatively / effectively with others						
26	Is friendly and helpful toward all contacts						
27	Demonstrates concerns for others safety						
28	Contributes to a positive, productive work environment						

Contribution Checklist Technical Competence		Excellent	Very Good	Satisfactory	Improvement Desired	Improvement Essential	N / A
SUPERVISORY SKILLS							
29	Interviews job candidates appropriately: makes effective hiring recommendations						
30	Ensures orientation and training of staff						
31	Recognizes and develops the capabilities of staff						
32	Encourages employee input to issues, and solutions to problems						
33	Motivates and empowers staff						
34	Comprehensively, effectively and regularly reviews employee performance						
35	Handles problem staff situations promptly and effectively						
36	Ensures compliance with health & safety legislation and policy						
37	Manages staff within the terms / conditions of administrative procedures and / or collective agreements which may apply						
38	Provides adequate day-to-day supervision and direction						
39	Ensures staff produce high quality work						
40	Promotes a positive work environment: advocates respect, integrity and personal growth among all staff						
41	Sets appropriate and professional example for staff						
TOTAL (out of a possible 205 points)*		+	+	+	+	=	

*If there is an N / A, please adjust the total score accordingly (i.e., 3 N/As – total score is out of 190)

*If Supervisory skills are not included in this evaluation the total is out of 140 points

OBJECTIVES MET FOR THIS REVIEW PERIOD?

(Review previous performance review and comment below)

**PERFORMANCE MANAGEMENT
OBJECTIVE SETTING WORKSHEET**

Employee's Signature

Date

From: _____ To: _____

Objectives To Be Met and Means Used to accomplish same	Results Expected and Start/Time Frame	Met Objectives YES NO	Comments

OVERALL EVALUATION

Unsatisfactory

Substandard but making progress.

Satisfactory

Above average

Excellent

COMMENTS

<p>Areas of strength:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>and these can be used more effectively by doing the following:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Areas for improvements:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>and these can be strengthened by doing the following:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Rated by _____
(Name) (Title)

(If not used as a self evaluation form, the employee should sign)

A copy of this Report has been given to me and has been discussed with me.

(Employee's Signature) (Date)

Employee wants additional personal comments attached Yes No

(Employee's Signature) (Date)

STRENGTHS, CONTRIBUTIONS, AND ACCOMPLISHMENTS

(Comment on outstanding performance issues here)

AREAS FOR DEVELOPMENT / SUGGESTED TRAINING

(In addition, where 'improvement required' performance issues have been identified, be specific including timeframes and results expected)

SUPERVISOR'S GENERAL COMMENTS

EMPLOYEE'S GENERAL COMMENTS

OBJECTIVES FOR THE PERIOD _____ To _____

(be specific including time frame and results expected)

IMMEDIATE SUPERVISOR

If recommended for progression in the salary / wage range, please attach a completed New Hire / Change of Employee Information Form.