# St. Lawrence University

Performance Record For \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name)

|  |  |
| --- | --- |
| Division/Department | Location |
| Title |
| Reporting Period | Today’s Date |
| Employment Date | Reviewer’s Name |

**Performance Evaluation**

**Guidelines:**

Staff evaluation and development requires a supervisor’s objectivity and all around willingness to discuss programs, plans, and attitudes openly and positively. This confidential, handwritten report should be the basis for a meaningful, two-way discussion. The ensuing performance discussion will be most successful when this report is thoughtfully and accurately completed. Where narrative is included quantitative data and specific examples are helpful whenever possible. Feel free to attach additional sheets, job descriptions, proposed revisions, or other information. Precede verbal comments with the corresponding number from the Rating Guide.

**Rating Guide:**

1 = Distinguished – Conspicuously meritorious performance. Consistently exceeds all requirements and expectations.

2 = Superior – Generally exceeds requirements and expectations with a minimum of guidance. Well above average performance.

3 = Competent – Responsibilities met in a wholly satisfactory manner. Normal guidance and supervision are required.

4 = Marginal- Improvement needed in some key job areas. Considerable guidance and supervision are required.

5 = Unsatisfactory – Major shortcomings in performance. Will require reassignment or separation if plans for progress are unsuccessful.

Amount of work accomplished

Dependability

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Interpersonal Relationships

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Initiative – Self-Starter

Knowledge of Job

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Problem Solving Skills

Organization/Time Management

Punctuality

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Attendance

Quality of Work

Support of Department/Division mission

Support of SLU Mission

**Goal Analysis:** Previously set goals that have been met. Specify whether personal or departmental goals.

**Goals for next performance period:** – specify needs, development activities, and timetables)

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**Overall Performance Rating** (general summary of performance and accomplishments)

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 Reviewer’s signature Date

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**Employee review and comments**

This performance review has been reviewed with me: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employee signature Date

Remarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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