|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Annual Performance Evaluation (year/year)** | | | Unit: | |
| **Employee Name** | **Position** | **Evaluation Period**  FROM TO | **Evaluation Date** | |
| **ORGANIZATIONAL IMPACT →** | *How does this position contribute to the stated mission and goals of the relevant Unit?* | *How does this position contribute to the UW mission?* | | |
| AREA | EXAMPLES AND COMMENTS | | | RATING |
| **Quality of work**    Competence, accuracy, thoroughness, across service profile. |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement\* |
| **Quantity of work**  Use of time, volume of work accomplished, ability to meet schedules, efficiency and productivity levels. |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement\* |
| **Job knowledge**    Degree of technical knowledge, understanding of job procedures, method and best practices. |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement\* |
| **Working relationships/Service**  Communication, cooperation and ability to work with supervisor, colleagues, co-workers, students and clients served. |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement\* |
| **Leadership and/or Supervisory skills**  Leadership skills across activity scope.  Training, directing and/or evaluating subordinates and/or teams, delegation, planning and organizing work, problem solving, decision-making ability, ability to communicate effectively. |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement\* |
|  |  | | | N/A |
| **Demonstrated alignment with unit mission, values, strategies** |  | | | Exceeds expectations\* |
| Meets expectations |
| Needs improvement**\*** |

\*Provide specific examples of this employee’s performance

**DEFINITIONS OF PERFORMANCE RATING CATEGORIES**

**Exceeds Expectations\*** – The employee regularly works beyond a majority of the performance expectations of this factor and has made many significant contributions to the efficiency and economy of this organization through such performance

**Meets Expectations** – The employee has met the performance expectations for this factor and has contributed to the efficiency and economy of this organization.

**Needs Improvement\*** – The employee has failed to meet one or more of the significant performance expectations for this factor.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employee Name** | **Position** | | **Evaluation Period** FROM  TO | | **Evaluation Date** |
| 1. SPECIFIC ACHIEVEMENTS (Attach additional sheets if necessary) | | | | | |
| 1. PERFORMANCE GOALS FOR THE NEXT EVALUATION PERIOD (If applicable) | | | | | |
| 1. TRAINING AND DEVELOPMENT SUGGESTIONS | | | | | |
| 1. REVIEW OF CURRENT JOB DESCRIPTION WITH EMPLOYEE (current job description should be provided to employee prior to performance evaluation meeting)  Yes   *Any updates should be discussed with employee and made in the job description document (work with EOHR as needed)* | | | | | |
| Review/renewal of telework agreement or flex schedule  Yes (updated telework agreement to be submitted to EOHR for employee file)  No  If no, please provide reason: | | | | | |
| REVIEWER’S NAME (*supervisor or primary evaluator)* | REVIEWER’S TITLE | | | REVIEWER’S SIGNATURE | REVIEW DATE |
| EMPLOYEE’S COMMENTS - | | | | | |
| This performance evaluation was discussed with me on the date noted above. I understand that my signature attests only that a personal interview was held with me; it does not necessarily indicate that I agree with the evaluation. | | EMPLOYEE’S SIGNATURE | | | DATE SIGNED |
| SECONDARY REVIEWER’S SECTION (where policy requires a secondary review of evaluation) | | | | | |
| Reviewer’s Comments: | | | | | |
| REVIEWER’S NAME (Print or Type) | REVIEWER’S TITLE | REVIEWER’S SIGNATURE | | | DATE REVIEWED |

Revised 2/8/2023