

### EXEMPT/ NON-EXEMPT STAFF PERFORMANCE APPRAISAL

Employee Name: <input type="text"/>	University ID: <input type="text"/>
Position Title: <input type="text"/>	
Unit/School: <input type="text"/>	Department: <input type="text"/>
Appraisal Type: Probationary <input type="checkbox"/> Annual <input type="checkbox"/> Reappraisal <input type="checkbox"/>	Evaluation Period: From <input type="text"/> To <input type="text"/> <small>Month/Year Month/Year</small>

#### INSTRUCTIONS:

1. Review and complete Sections 1, 2 and 3.
2. Review your ratings and comments and make a determination of the staff member's overall performance using the Overall Rating Guidelines on page four.
3. Place the corresponding number (1, 2, 3, 4, or 5) that best describes your assessment of overall performance in the Evaluation Summary on page four.
4. Discuss the evaluation with the staff member, provide him/her with a copy and allow the staff member an opportunity to record any comments.
5. If there is a change in salary, attach a budget-approved Staff Information/Adjustment Form. Attach the evaluation and forward both to your campus Human Resources Department.

#### PERFORMANCE RATING GUIDELINES:

- ③ This rating is reserved for those who consistently excel in their job performance. It indicates that performance is well beyond that which can be expected from most staff members.
- ② This rating is used for staff members who perform their jobs well and are fully competent. It indicates that performance meets and may exceed expectations.
- ① This rating is used when performance falls below an acceptable level. It indicates that the staff member is not performing as expected and that improvement is necessary.

**SECTION 1**

Insert 5 key job duties from the staff member's up-to-date job description. For each duty write 2-3 performance standards that describe your expectation of performance. Check the box that corresponds to your estimate of actual performance using the Performance Rating Guidelines on page one. Consider the following example:

Job Duty:	Types letters and statistical reports for the director.	RATING	1	2	3
Standard:	Typing is neat and in the proper format.				X
	Final copies contain no errors.			X	
	Monthly reports are completed by the first of the month.				X

JOB DUTY #1:					
PERFORMANCE STANDARDS:	RATING	1	2	3	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

  

JOB DUTY #2:					
PERFORMANCE STANDARDS:	RATING	1	2	3	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

  

JOB DUTY #3:					
PERFORMANCE STANDARDS:	RATING	1	2	3	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

  

JOB DUTY #4:					
PERFORMANCE STANDARDS:	RATING	1	2	3	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

  

JOB DUTY #5:					
PERFORMANCE STANDARDS:	RATING	1	2	3	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**SECTION 2 (Optional)**

Insert additional key duties or goals from the past evaluation year you wish to evaluate.

JOB DUTY/GOAL:	RATING	1	2	3
1. <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION 3**

**UNIVERSITY STANDARDS AND EXPECTATIONS**

RATING 1 2 3

- Maintains a level of attendance and punctuality necessary to meet the responsibilities for the job.
- Maintains a professional image in keeping with the job's responsibilities.
- Conserves University resources through the proper utilization of staff, materials and equipment.
- Demonstrates a positive attitude toward the job and University.
- Demonstrates work habits that contribute to a safe work environment.
- Protects the confidentiality of all University information.
- Has documented compliance with all University policies and requirements concerning infectious disease prevention and control, including tuberculosis and Hepatitis B. Yes  No

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**EVALUATOR:**

1. Discuss the performance strengths and accomplishments of this staff member during the performance period.

2. Identify developmental needs for this individual, and how you can assist with performance improvement. Include training recommendations and job-related activities that will provide opportunities for growth.

3. Identify any performance or project goals you have set for the coming year.

**OVERALL RATING GUIDELINES:**

- ⑤ This staff member has made significant contributions to advance the position of the department and/or University toward excellence and prominence. Only a small percentage of staff members who exhibit uniform excellence and initiative will achieve this level of performance.
- ④ This staff member has been instrumental to the department's success and has performed in an exemplary manner.
- ③ This staff member is proficient. Performance is what is expected of a fully qualified and experienced person.
- ② This staff member occasionally fails to exhibit proficiency. Improvement is necessary to meet the expectations for acceptable performance.
- ① This staff member has serious deficiencies in key areas. Performance fails to meet expectations and is not acceptable.

**EVALUATION SUMMARY:**

Enter the number fusing the Overall Rating Guidelines that best represents your overall rating of this staff member's performance during the evaluation period.

OVERALL RATING:

Increase in salary (if applicable): Yes  No  N/A

Amount:

If reappraisal is recommended, indicate date:  /  /   
mm dd yy

**STAFF MEMBER:**

Provide your thoughts on this evaluation and plans for professional growth.

Note: Staff member's signature indicates the appraisal was discussed. It does not necessarily denote agreement.

Staff Member's Signature: \_\_\_\_\_

Date:  /  /   
mm dd yy

**EVALUATOR:**

I certify that I have reviewed the most current, HR approved Job Description for the position on which this performance appraisal is based, and it accurately reflects the employee's job responsibilities.

Evaluator's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date:  /  /   
mm dd yy

Next Level Manager's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date:  /  /   
mm dd yy