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| **INSTRUCTIONS** |
| * University policy requires that each EPA Non-Faculty employee receive a written annual performance evaluation for work performed each fiscal year (July 1 through June 30).
* This review should be delivered and discussed with the employee no later than June 30 of each year.
* Supervisors may use this template or a template/memorandum of their own design.
* For employees who have been in their present position less than 90 days as of June 30, the supervisor may choose either to complete an interim review at the 90-day mark or to wait until the end of the next performance cycle.
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| **REVIEW TYPE:** | **[ ]  Interim** **[ ]  Annual** | **REVIEW CYCLE:** | **From:**  |       | **To:**  |       |

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| **Dept. Name:** |       | **Employee Name:** |       |
| **Dept. #:** |       | **Employee PID:** |       | **Position #:** |       |
| **Supervisor Name:** |       | **Position Title:** |       |
| **Supervisor Title:** |       | **Date of Review with Employee:** |       |
| **ORGANIZATIONAL VALUES** | **RATING** |
| 1. **QUALITY OF WORK:**
2. Produces work that is accurate, thorough, and demonstrates sufficient analysis and decision-making to meet the requirements of the employee’s position and profession.
3. Errors are infrequent, are recognized prior to completion of project, and/or are corrected as soon as identified with little to no disruption of service.
4. Makes efficient and appropriate use of materials resulting in sufficient cost effectiveness and little to no waste of resources.
5. Adheres to requirements for recordkeeping and documentation of work in a manner readily understandable to others and sufficient for effective use by self and others.
 |  **Exceeds Expectations** **[ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
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| 1. **TASK MANAGEMENT:**
2. Completes required volume of work by established deadlines.
3. Sufficiently prioritizes tasks and organizes work flows. Adapts to work changes and re-prioritizes appropriately.
4. Provides sufficient updates to supervisor and other relevant parties on the status of assigned work. Appropriately escalates work concerns to management when warranted.
5. Does not require an excessive degree of oversight or correction. Does not place an undue burden on supervisor or colleagues to complete assigned tasks.
 |  **Exceeds Expectations [ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
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| 1. **CUSTOMER-ORIENTED COMMUNICATION:**
2. Clearly and accurately conveys information in a manner suitable for the target audience.
3. Actively listens to determine the most effective way to address customer needs and concerns.
4. Maintains a professional and respectful tone and exhibits diplomacy when dealing with sensitive or confrontational situations.
5. Behavior, gestures, and speech present a positive image of the University to customers.
 |  **Exceeds Expectations [ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
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| 1. **TEAMWORK & COLLEGIALITY:**
2. Communicates and engages directly, clearly, and tactfully with colleagues and demonstrates respect for diversity and differing points of view among colleagues.
3. Shares knowledge and resources to reach common goals. Provides feedback and healthy dialogue on performance and operational issues, as requested. Willingly adapts to change and adheres to decided actions.
4. Maintains a professional personal appearance and contributes equitably to maintaining the workplace appearance.
5. Honors commitments, adheres to workplace rules, and performs additional duties when team members are absent, during times of increased workload, or as otherwise requested by management to meet business needs.
6. Stays productive and focused on assigned tasks during assigned work hours and maintains a sufficient level of accessibility when away from the office to minimize impact on operational needs.
 |  **Exceeds Expectations [ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
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| 1. **POLICY & SAFETY COMPLIANCE:**
2. Complies with University personnel policies, including adherence to prohibitions on harassment, discrimination, and workplace violence, and protection of confidentiality of personnel records for employees, students, research subjects, patients, and others as required.
3. Complies with departmental policies and procedures, as well as trade standards, industry protocols, state and federal regulations, and the professional ethics associated with the position.
4. Complies with all University safety requirements for the position, including training, medical clearance, use of personal protective equipment, and injuries/illness reporting and medical treatment.
5. Complies with all other University policies, including IT security protocols and appropriate use of University information technology, property, and financial resources.
 |  **Exceeds Expectations [ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
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| 1. **SUPERVISION (IF APPLICABLE):**
2. Provides adequate stewardship of assigned resources, including budget, space, equipment, and staffing.
3. Plans and communicates unit goals and objectives. Provides clear and reasonable direction regarding assigned duties. Distributes work appropriately within unit.
4. Provides candid, timely, and constructive feedback on performance and behavior. Applies appropriate corrective action as warranted. Attends to employee development.
5. Serves as role model. Engenders trust, commitment, and civility. Fosters respect for diversity within work unit. Responsive to feedback from subordinates and others.
 |  **Exceeds Expectations [ ]**  **Satisfactory [ ]**  **Needs Improvement [ ]**  **Not Satisfactory [ ]**  |
| **COMMENTS ON PERFORMANCE IN THIS CATEGORY** |
|       |
| **OVERALL RATING (required for Annual Review only)** |
| **NOT SATISFACTORY** | **NEEDS IMPROVEMENT** | **SATISFACTORY** | **EXCEEDS EXPECTATIONS** |
| **[ ]**  | **[ ]**  | **[ ]**  | **[ ]**  |
| **OVERALL COMMENTS FOR PERFORMANCE CYCLE** |
|       |
| **CORRECTIVE ACTION PLAN (required for all ratings of not satisfactory or needs improvement)** |
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| **PERFORMANCE GOALS FOR THE NEXT PERFORMANCE CYCLE** |
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| **SIGNATURES FOR PERFORMANCE REVIEW** |
| **2nd-Level Supervisor:***(optional)* |  | **Date:** |       |
| **Supervisor:** |  | **Date:** |       |
| I acknowledge that I have received this performance review. I understand that my signature below does not necessarily imply agreement with the ratings given or the comments included, and that if I choose, I may write a response to include with this appraisal document. |
| **Employee:** |  | **Date:** |       |