

**GROUP ONE EMPLOYEES
PERFORMANCE MANAGEMENT AND COMPETENCY RATING FORM**

STANDARDS AND INSTRUCTIONS

- A. This form is used in accordance with Civil Service Commission Rule 2-3 and Civil Service Regulation 2.06 to document performance factors and objectives, required competencies, and the supervisor's evaluation of the employee's performance for: (1) probationary ratings, (2) progress reviews, and (3) annual ratings. This form is only used for Group One employees.
- B. A probationary period is required upon: (1) hire, (2) promotion, and (3) lateral job change between departments to a different classification. A probationary period is not required, but may be established for a reinstatement or demotion.
- C. A full-time probationary employee shall be rated upon completion of six months and twelve months of service. Less than full-time probationary employees shall be rated upon completion of nine months and eighteen months of service. New hires without status shall also be rated upon completion of three months of employment.
- D. The supervisor or supervisor and employee may establish performance factors or objectives setting forth expectations for the rating period. Performance objectives should be briefly stated but specifically defined and should include expected outcomes. The use of performance factors is optional for Group One employees. All relevant competencies must also be identified. Competencies measure behaviors or how the employee accomplishes the objectives.
- E. At the beginning of each rating period, the supervisor must review the performance factors, objectives, and competencies with the employee and explain that they set the performance expectations for the rating period. The employee and supervisor must sign and date the form and retain a copy.
- F. The supervisor should provide regular performance feedback to the employee. Formal progress reviews may be given during the course of the annual review period.
- G. At the end of the review period, the supervisor shall evaluate the employee's performance and assign an overall rating. The employee's achievements in relation to the performance factors (what was accomplished) and the competency evaluation (how the objectives were accomplished) must be considered in determining the employee's rating. The supervisor's evaluation must be documented on the form. The supervisor must discuss the evaluation with the employee.
- H. **The probationary rating categories are "Unsatisfactory," "Meets Expectations," and "High Performing."** Meets Expectations and High Performing are satisfactory ratings. An Unsatisfactory probationary rating is discipline and may be the basis for additional discipline, up to and including dismissal.
- I. **The annual rating categories are "Needs Improvement," "Meets Expectations," and "High Performing."** A Needs Improvement rating is not discipline. If a Needs Improvement rating is issued, the appointing authority shall establish a plan for improving the employee's performance or behavior.
- J. All ratings must be completed within twenty-eight calendar days of the end of the rating period.
- K. The supervisor and employee must sign and date the rating as evidence of the review. The appointing authority must sign and date Unsatisfactory probationary ratings and Needs Improvement annual ratings.
- L. The appointing authority must notify the State Personnel Director of any Unsatisfactory ratings within twenty-eight calendar days of the rating.
- M. Training on performance management is available from the Civil Service Commission. See Web site <http://web1mdcs.state.mi.us/MCSCHRTD/HRTDHome2.aspx> for details.

State of Michigan
Civil Service Commission
Office of Classifications, Selections, and Compensation
P.O. Box 30002, Lansing, MI 48909

GROUP ONE EMPLOYEES
PERFORMANCE MANAGEMENT AND COMPETENCY RATING FORM
FOR PROBATIONARY RATINGS, PROGRESS REVIEWS, AND ANNUAL RATINGS

Information and instructions for conducting probationary and annual reviews and evaluations are found in Civil Service Regulation 2.06, available from all human resource offices and the Civil Service Commission Web site, at www.michigan.gov/mdcs.

Name		Employee I.D. No.	Position Code
Classification		Department/Agency/Bureau/Division	
Supervisor's Name	Supervisor I.D. No.	Rating Period Start/End Dates	
		From:	To:

REVIEW OF PERFORMANCE FACTORS AND COMPETENCIES

I certify that I have reviewed the performance factors and competencies identified on this form and received a copy.	I certify that the performance factors and competencies identified on this form provide the basis for evaluating this employee's performance during this rating period.
_____	_____
Employee's Signature and Date	Supervisor's Signature and Date

PROBATIONARY RATING

<input type="checkbox"/> 3 MONTH (NEW HIRE)	<input type="checkbox"/> 6 MONTH	<input type="checkbox"/> 9 MONTH (PART-TIME)
<input type="checkbox"/> 12 MONTH	<input type="checkbox"/> 18 MONTH (PART-TIME)	<input type="checkbox"/> OTHER _____
RATING: <input type="checkbox"/> Unsatisfactory	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> High Performing

PROGRESS REVIEW

I certify that I have had a progress review and discussed my performance with my supervisor. My signature reflects only that a meeting occurred.

Employee's Signature and Date

I certify that the employee's progress has been reviewed with the employee.

Supervisor's Signature and Date

ANNUAL RATING

RATING: **Needs Improvement** **Meets Expectations** **High Performing**

I certify that I have had the opportunity to review this rating and understand that I am to receive a copy of it. I understand that my signature does not necessarily mean that I agree with the rating.

Employee's Signature and Date

I certify that this rating report constitutes my evaluation of the performance of this employee for the period covered.

Supervisor's Signature and Date

I certify that I have reviewed this evaluation and concur with the rating given. (Required only if rating is Needs Improvement or Unsatisfactory.)

Appointing Authority's Signature and Date

Name	Rating Period From: _____ To: _____
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PERFORMANCE OBJECTIVES AND EVALUATION

List the performance factors/objectives and accomplishments expected during the rating period. Revise and add factors/objectives, as necessary, throughout the rating period. Upon completion of the rating period, summarize the employee's accomplishments and performance.

Performance Factors/Objectives	Evaluation









Name	Rating Period From:	To:
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GROUP ONE COMPETENCIES





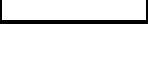



Competencies are defined as the ability, skill, knowledge, and motivation needed for success on the job. All relevant competencies (suggested minimum of five) should be evaluated.

RATING CATEGORIES

Probationary: US — Unsatisfactory	ME — Meets Expectations (Satisfactory)	HP — High Performing (Satisfactory)
Annual: NI — Needs Improvement	ME — Meets Expectations	HP — High Performing

CHECK ALL THAT APPLY	COMPETENCIES (Check and Evaluate All Relevant Competencies)	RATING
<input type="checkbox"/>	<p><u>Adaptability</u> — Maintaining effectiveness when experiencing major changes in work tasks or the work environment; adjusting effectively to work within new work structures, processes, requirements, or cultures.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Applied Learning</u> — Assimilating and applying new job-related information in a timely manner.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Building Customer Loyalty</u> — Effectively meeting customer needs; building productive customer relationships; taking responsibility for customer satisfaction and loyalty.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Communication</u> — Clearly conveying and receiving information and ideas through a variety of media to individuals or groups in a manner that engages the audience, helps them understand and retain the message, and permits response and feedback from the audience.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Contributing to Team Success</u> — Actively participating as a member of a team to move the team toward the completion of goals.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Decision Making</u> — Identifying and understanding issues, problems, and opportunities; comparing data from different sources to draw conclusions; using effective approaches for choosing a course of action or developing appropriate solutions; taking action that is consistent with available facts, constraints, and probable consequences.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Impact</u> — Creating a good first impression, commanding attention and respect, showing an air of confidence.</p> <p><u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Initiating Action</u> — Taking prompt action to accomplish objectives; taking action to achieve goals beyond what is required; being proactive.</p> <p><u>Comments:</u></p>	

Name	Rating Period From: _____ To: _____
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CHECK ALL THAT APPLY	COMPETENCIES (Check and Evaluate All Relevant Competencies)	RATING
<input type="checkbox"/>	<p><u>Innovation</u> — Generating innovative solutions in work situations; trying different and novel ways to deal with work problems and opportunities. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Integrity/Honesty</u> — Contributing to maintaining the integrity of the organization; displaying high standards of ethical conduct and understanding the impact of violating these standards on the organization, self, and others; being trustworthy. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Interpersonal Skills</u> — Considering and responding appropriately to the needs, feelings, and capabilities of others; adjusting approaches to suit different people and situations; and representing the agency to the public and other agencies in a courteous and pleasant manner. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Job Knowledge</u> — Understanding, absorbing, retaining, and correctly applying information, instructions, and procedures to complete the job assignments effectively and being skilled in the use and maintenance of the equipment related to the work. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Managing Work</u> — Effectively managing one's time and resources to ensure that work is completed efficiently; makes timely requests for sick/annual leave time; utilizes sick leave appropriately; reporting for work and returning from breaks and lunch in a timely manner. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Quality Orientation</u> — Accomplishing tasks by considering all areas involved, no matter how small; showing concern for all aspects of the job; accurately checking processes and tasks; being watchful over a period of time. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Safety Awareness</u> — Being aware of conditions that affect employee safety. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Stress Tolerance</u> — Maintaining stable performance under pressure or opposition (such as time pressure, or job ambiguity); handling stress in a manner that is acceptable to others and to the organization. <u>Comments:</u></p>	
<input type="checkbox"/>	<p><u>Valuing Diversity and Inclusion</u> — Actively appreciating and including the diverse capabilities, insights, and ideas of others and working effectively and respectfully with individuals of diverse backgrounds, styles, abilities, and motivations. <u>Comments:</u></p>	