

## STEPHEN F. AUSTIN STATE UNIVERSITY

## Performance Review (Directors/Executive Personnel)

Name:	Campus ID Number:				
Department:	Title:				
Review Period:	Job Description Review				
Self Evaluation					

**I.** Describe and evaluate your overall performance and/or achievements for this review period. Please provide comments that demonstrate your assessment: NOTE: If text exceeds space, attach additional pages.

**II.** Describe the most difficult part of your job during the past year and the steps you took to overcome or improve:

III. Describe specific goals or specific projects you want to accomplish during the next review period.

## **Supervisor Evaluation**

I.	Leadership: (Consider how employee influences, motivates, and encourages employees.)		
II.	Communication: (Consider how employee conveys information verbally and in writing. Consider employee's listening skills and professional courtesy in communicating with others.)		
III.	Work Relationships/Teamwork/Customer Relations: (Consider how harmoniously and effectively the employee responds and interacts with employees and others within or outside their department and University.)		
IV.	Decision Making: (Consider employee's ability to identify issues and choose appropriate course of action.)		

## **Summary Sheet**

Areas for Improvement/Action Pla	nn:	
Summary:		
OVERALL EVALUATIO	<u>N</u> : (check one)	
It applies to others whose perf	t may apply to inexperienced newco formance falls far short of expectation improve or move out of the job in a	ons. Employees performing a
Needs Improvement: Perfo	rmance is acceptable in some but no ently meet requirements and the nee	ot all aspects of the job.
Fully Acceptable: Performa	nce meets all requirements and expendent is called for in the job in a time perform at this level.	<u> </u>
Commendable: Performance	e is clearly and consistently above vectors in the consistently above expectations in m	1 0
	onsistently exceeds expectations in a vindividuals whose exceptional per	
Signatures:		
My signature indicates I have reviewed th immediate supervisor or his/her designee. and does not necessarily imply I agree wit document to be held in my personnel file	My signature also means that I have been the evaluation. I understand that I may	n advised of my performance
Employee Signature:Date:		Date:
Supervisor's Signature:Date:		Date:
Reviewing Supervisor's Signature: Date:		