



The City of Waterbury

Department of Human Resources

Performance Appraisal

DEPT: _____ DATE: _____

NAME: _____

TITLE: _____ APPRAISAL PERIOD: _____ to _____

TYPE: Probationary HIRE DATE: _____

Annual DATE STARTED IN POSITION: _____

The purpose of this appraisal form is to open and document a discussion between a manager and an employee regarding job expectations and performance. This form may be used: for an employee development plan, as a component of a promotional exam or selection process, and to document disciplinary action.

Completing this appraisal:

1. Review the Performance Appraisal Policy
2. If you have any questions about the policy or reviewing employees contact Human Resources.
3. Fill in page 2 through 5 by indicating the appropriate rating.
4. Obtain next level manager signature. Department procedures may require Department Head sign-off.
5. Conduct a conversation with the employee regarding ratings.

Submit the Performance Review Record to Human Resources for review and permanent filing. Probationary failures must be approved by the Director of Personnel prior to meeting with the probationary employee.

PERFORMANCE LEVELS

EXCEEDS EXPECTATIONS - Outstanding performance that results in extraordinary and exceptional accomplishments with significant contributions to the objectives of the Department, Bureau and the City.

SATISFACTORY PERFORMANCE - Good performance with incumbent fulfilling all position requirements and, on occasion, generating results above those expected for the position.

NEEDS IMPROVEMENT - Performance does not meet expectations. Situation requires prompt attention and an action plan to address deficiencies.

JOB KNOWLEDGE

Knowledge of policies and procedures; or knowledge of techniques, tools, equipment, procedures, and materials.

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QUALITY OF WORK

Freedom from errors and mistakes. Accuracy, quality of work in general.

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QUANTITY OF WORK

Work output of the employee in measurable terms.

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CUSTOMER SERVICE

The degree to which the employee responds to internal and external customers to provide answers and solutions to routine or complex questions, or problems that might arise in daily interactions.

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COMPLIANCE

Follows all applicable policies, procedures, standards, and laws that relate directly to position and department. Observes safety and other regulations.

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COMPLETE THIS SECTION FOR SUPERVISORY PERSONNEL ONLY

PLANNING AND ORGANIZING


The ability to analyze work, set goals, develop plans of action, utilize time. (Consider amount of supervision required and extent to which you can trust employee to carry out assignments).

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DIRECTING AND CONTROLLING

The ability to create a motivating climate, achieve teamwork, train and develop, measure work in progress, take corrective action.

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DECISION MAKING

The ability to make decisions (quality and timeliness of decisions).

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ATTENDANCE / PUNCTUALITY

Comes to work daily and conforms to scheduled work days and hours.

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OVERALL EVALUATION

Employees receiving more than one NEEDS IMPROVEMENT cannot receive an Overall Evaluation of SATISFACTORY PERFORMANCE or EXCEEDS EXPECTATIONS

____ EXCEEDS EXPECTATIONS
____ SATISFACTORY PERFORMANCE
____ NEEDS IMPROVEMENT

EMPLOYEE COMMENTS

EMPLOYEE'S SIGNATURE: _____
Signing this form only indicates that this form has been discussed with me.

FOR PROBATIONARY REVIEW ONLY: I DO ___ DO NOT ___ Recommend continued employment of this probationary employee.

Prepared by: _____ Supervisor
Date: _____

Approved by: _____ Next Mgmt. Level
Date: _____

Approved by: _____ Dept Head
Date: _____ (Required for Probationary Employees)

Reviewed and approved by: _____ Personnel Director
Date: _____ (Probationary Employees Only)