



The Bureau of Public Service System PERFORMANCE EVALUATION FORM

GENERAL INFORMATION			
Employee Name:		Ministry/Bureau:	
Position Title:		Type of Evaluation:	<input type="checkbox"/> Annual <input type="checkbox"/> Post-Probation <input type="checkbox"/> Quarterly <input type="checkbox"/> Periodic <input type="checkbox"/> Other:
Position Type:	Choose One	Period Covering:	From _____ To _____

RATING DEFINITIONS	
4 - Exceptional	Sustained exceptional performance. Achievements are clearly the best among peers or have significance to project outcomes.
3 - Good	Consistently exceeds established standards. Performance is significantly better than average.
2 - Satisfactory	Performance satisfies the requirements of the job. Performance meets standards set for the position on a consistent basis.
1 - Unsatisfactory	Performance does not meet and/or fails standards established for the job. Significant performance improvement needed. Performance at this level could lead to adverse action.

SECTION ONE: DUTIES & RESPONSIBILITIES:

Instructions: Supervisor and employee to review "Duties & Responsibilities" of employees' current Position Description and rate employees' knowledge and ability to perform the duties outlined in the PD. Please attach the PD used in the evaluation to this form. Supervisor should have Employee rate self in the "Self Appraisal by Employee" column first, then Supervisor to enter the rating. Both employee and supervisor to include written comments to justify ratings if needed.

	Rating		COMMENTS
	Self Appraisal by Employee (1 - 4)	Supervisor (1 - 4)	
Job Knowledge			Employee: Supervisor:
Job Performance based on Key Duties and Responsibilities outlined in the Position Description (attached)			Employee: Supervisor:

SUPERVISOR'S POSITION/JOB DESCRIPTION CERTIFICATION: By checking this box , I certify that the position description on file for this employee's position is **NOT** current and needs to be updated. A revised position description will be submitted to the Bureau of Public Service System within **one month** from signing this form.

EMPLOYEE'S POSITION DESCRIPTION CERTIFICATION: By checking this box , I certify that the job description on file for my position is **NOT** current and needs to be updated.

SECTION TWO: PERFORMANCE COMPETENCIES:

Instructions: Employee and Supervisor both enter the score which most adequately describes the employee's ability to demonstrate the performance competencies listed. Use **Appendix A** if there are comments by both Employee and Supervisor; OR if rating is 4 (exceptional). Please see rating definitions above.

TO BE COMPLETED FOR ALL POSITIONS		
Performance Competencies	Rating See above for rating definitions. Enter the numerical rating in the appropriate column.	
	Self Appraisal by Employee (1 – 4)	Supervisor (1 – 4)
ATTENDANCE/WORK HABITS: Appropriate use of leave, consideration of work load, prompt, appropriate notification of tardiness, maintains required hours, effective use of time.		
COOPERATION: Ability and willingness to work with associates, superiors and others outside the workplace (i.e. customers, other agencies, etc.) Develops cooperation while working toward solutions and goals.		
ADAPTING TO CHANGE: Responds positively to change, showing willingness to learn new ways to accomplish work.		
COMMUNICATION: Ability to communicate effectively orally & in writing to associates, superiors, and others outside the workplace (i.e. customers, other agencies, etc.) Uses appropriate channels, assumes responsibility for communicating to superiors/coworkers. Shares relevant information.		
DEPENDABILITY/COMMITMENT TO WORK: Conscientious, responsible, reliable with respect to work completion. Commits fully to the job. Strong work ethic.		
INITIATIVE: Contributes new ideas; able to work independently toward approved goals; able to take initiative to complete work without being told; Improves working skills and abilities.		
INTEGRITY: Is widely trusted; is seen as a direct truthful individual, can present the unvarnished truth in an appropriate and helpful manner, keeps confidences, admits mistakes, doesn't misrepresent him/her self for personal gain.		
LEARNING ABILITY: Readily grasps job requirements. Has a clear understanding of facts or factors pertinent to the job.		
PRODUCTIVITY: Demonstrated accomplishment, volume of work. Submits assignments timely. Operates with a clear sense of priorities.		
QUALITY OF WORK: Thoroughness, accuracy and neatness of work. Committed to continuous improvement efforts. Takes appropriate action to reduce errors.		
SAFETY AWARENESS: Contributes to and encourages a safe work environment. Follows safety rules, follows good practices, takes proper care of equipment.		
TOTAL POINTS:		
The following categories apply only to SUPERVISORY, MANAGERIAL and/or PROFESSIONAL LEVEL positions.		
Performance Competencies	Self Appraisal (1 – 4)	Supervisor (1 – 4)
ATTENDANCE AT TRAINING: Attends supervisory-related training provided by the BPSS and/or Government.		
LEADERSHIP SKILLS: Employee successfully demonstrates appropriate leadership skills to motivate and encourage employees to be more productive; realizes and complements accomplishments of staff; forward thinking and fosters such abilities in his/her staff; able to recognize and foster potential in his/her staff.		
MANAGING SUBORDINATES: Effective in evaluating, communicating to, and developing subordinates; to ensure programs and staff under him/her have sufficient funds and proper office tools (equipments) to complete their duties and responsibilities.		
PROBLEM SOLVING/DECISION MAKING CAPABILITIES: Shows capability to analyze and solve problems requiring analytic or innovative thinking.		
VISION/MISSION ALIGNMENT: Articulates and implements the vision and mission of the department and Ministry. Sets high expectations for achieving the mission, and personally demonstrates behavior and activities that symbolize and further that mission. Demonstrates the capacity to maintain the departments direction and consistency in meeting their defined strategic objectives.		
TOTAL POINTS:		

3. Goals, tasks, projects, activities, etc. for the upcoming year. **Both supervisor and employee** should discuss and list down these goals and include a timeline to help guide employee:

4. **For Employee** - In what ways do you believe that your supervisor/manager could help to improve your performance and professional growth on future assignments?

SECTION FIVE – ADMINISTRATIVE REVIEWS:

EMPLOYEE: By signing below, I acknowledge that this evaluation was reviewed with me by my supervisor.

Print Name _____ Signature: _____ Date: _____

SUPERVISOR/MANAGER/BUREAU HEAD:

Print Name _____ Signature: _____ Date: _____

AUTHORIZED MANAGEMENT OFFICIAL:

Print Name _____ Signature: _____ Date: _____