

Performance Appraisal form for TEAMS Exempt Employees							
Employee's name:  Job Title:  Department:		UF ID: Appraisal Period: Overall rating:					
				Prior to completing the appraisal, it i	s recommended that the	employee submit a self-assessr	nent.
					ability, customer service	, teamwork, interpersonal skill	ormance in areas such as productivity, s, supervisory skills or other appropriate
An overall rating based on the rat consistent with the evaluative commoverall rating of "Minimally Achieve	ents on the narrative. Ple		<b>Form.</b> The overall rating should be elations Satellite office prior to issuing an				
• Exceeds:	Almost always exceeds performance standards. Consistently produces excellent quality work, is innovative, and demonstrates high level leadership qualities.						
• Above Average:	Consistently meets and	regularly exceeds performanc	e standards. Able to work independently.				
• Achieves:	Generally meets performance standards. Seldom exceeds or falls short of desired results. Able to work independently, but sometimes requires direction.						
• Minimally Achieves:	Frequently fails to mee	t performance standards. Req	uires frequent instruction and supervision.				
• Below Performance Standards:	Fails to meet performa	nce standards.					
signature does not necessarily indica comments/rebuttal on any aspect of t well as Human Resource Services fo Resource Services within ten (10) we An employee may not engage in any institutional obligations in keeping winterests. Please check applicable be	at my evaluation has been te my agreement with the he performance appraisal r inclusion in my official orking days of receipt of outside activity that intervith UF Regulation 6C1-lox (as of this date):  o report re of Outside Activities a	e evaluation. Also, I understan I, and that a copy of the common personnel file. Rebuttals/com appraisal.  rferes with the full performance 1.011, which governs disclosur	ents will be provided to my supervisor as ments should be submitted to Human e of professional responsibilities or other e of outside activities and financial AA-GA-L-267*) to the chair/supervisor				
Employee's Signature		Date					
Supervisor's Name & UFID (please	print)	Supervisor's Signature	Date				

Annual appraisals must be issued to, signed, and dated by employees no later than March 31. Forms should be mailed or delivered to Human Resource Services, Attn: Employee Relations, PO Box 115003, Campus. Phone: (352) 392-2477.