

UNCLASSIFIED EXECUTIVE SERVICE Performance Evaluation Form

Attachment F

EMPLOYEE INFORMATION					
EMPLOYEE NAME	EMPLOYEE ID # POSITION #				
	OR				
CURRENT CLASSIFICATION TITLE / CLASS #	SUPERVISOR NAME				
WORK UNIT / LOCATION	SECTION RDC				
REPORTING PERIOD (MM/DD/YY)	NEXT EVALUATION DUE DATE				
From To					

PERFORMANCE ASSESSMENT

1. **Evaluate and discuss the employee's job performance.** Base your evaluation upon the position requirements, achievement of goals established during the last year, and your assessment of the employee's accomplishments.

2. Are there areas of performance that should be particularly noted? Provide specific examples.

- **3.** Are there areas of performance needing more attention or improvement? Coaching, suggestions for improvement or development in job performance and work behavior. Provide specific examples.
- **4.** State and discuss expectations and goals for the upcoming review period. Give examples of how these goals can be met (e.g., training). How will you support the employee to accomplish these goals?

5. Individual development plan. List specific training, mentoring, and developmental opportunities.

6. Additional comments.

SIGNATURES

Employee's signature below only confirms that the evaluation has been discussed with the employee and does not indicate agreement or disagreement with the content. Furthermore, this form does not indicate continued employment. This position serves at the pleasure of the Governor/appointing authority and may be terminated at any time.

EMPL	DYEE SIGNATURE	DATE	SUPE	ERVISOR SIGNATURE	DATE
REVIE	WER SIGNATURE	DATE	HUM	AN RESOURCES SIGNATURE	DATE
ADDITIONAL FORMS ATTACHED					
	EMERGENCY CONTACT FORM			POSITION DESCRIPTION: Revised to reflect duties since the last annual review.	
	INDIVIDUAL DEVELOPMENT PLAN			POSITION DESCRIPTION: The PD on file , dated continues to reflect duties of position.	

cc: Supervisor's File; Employee; Supervisor's Manager; and Personnel File