



**ROYAL CIVIL SERVICE COMMISSION
SUMMATIVE PERFORMANCE REVIEW FORM**



For the period _____ to _____

Employee / Manager Information

Name of Agency:

Name of the Employee:

Employee ID No:

Position Title:

Position Level:

Major Occupation Group:

Sub Group:

Name of the Manager:

Position Title of the Manager:

Process: In the first instance, the employee is to complete the Summative Review Form as best they can with reference to the Work Planning and Review Forms. Performance Outputs and Core Competencies are to be listed/described and a 'self-rating' given along with supplementary information where necessary. Note: While rating the performance outputs, both quality and quantity aspects must be considered. When complete, the form is then submitted to their manager. The manager will review the form and make appropriate notes. A meeting between the manager and employee is then arranged to discuss the Summative Review Form in more detail and finalize ratings. The 'final rating' is to be approved and written down by the Manager.

RATINGS ON PERFORMANCE FACTORS

(Use additional sheets if required)

<i>(Ratings should pertain to Performance Outputs as outlined in Work Planning and Review Forms. Add additional outputs as necessary)</i>	Employee self-rating:	Final rating (Manager):
PERFORMANCE OUTPUT 1:		
PERFORMANCE OUTPUT 2:		
PERFORMANCE OUTPUT 3:		
PERFORMANCE OUTPUT 4:		
PERFORMANCE OUTPUT 5:		
PERFORMANCE OUTPUT 6:		
	TOTAL FINAL RATING:	
Divide 'Total Final Rating' by number of individual final ratings =	AVERAGE RATING (A):	

(Signature of the Supervisor)

(Signature of the Manager)

(Signature of the Employee)

RATINGS ON CORE COMPETENCIES

(To be completed by the Employee)			
Core Competency	Comments:	Employee Self-rating:	Final Rating (Manager and/or Supervisor):
1. Integrity			
2. Attitude			
3. Punctuality			
4.			
5.			
6.			
7.			
		TOTAL FINAL RATING:	
Divide 'Total Final Rating' by 7 =		AVERAGE RATING (B):	

(Signature of the Supervisor)

(Signature of the Manager)

(Signature of the Employee)

DEVELOPMENT NEED OF THE EMPLOYEE

Comments by the Employee

(Comment on some of your special achievement and on areas that you need to improve)

(Signature of the Employee)

Comments by Supervisor:

(Comment on the special achievements and/or development needs of the employee and suggest some measures to improve the performance of the employee)

(Signature of the Supervisor)

Comments by the Manager:

(Comment on the special achievements and/or development needs of the employee and suggest some measures to improve the performance of the employee)

(Signature of the Manager)

THE APPRAISAL MEETING WITH THE EMPLOYEE IS CONCLUDED AT THIS POINT.

THE MANAGER SHALL COMPLETE THE FINAL RATINGS CALCULATION

BELOW, AND FORWARD THE SUMMATIVE REVIEW FORM TO THE HEAD OF AGENCY FOR REVIEW AND FINAL APPROVAL.

FINAL RATINGS CALCULATION:

Average Rating (A): _____ 60% Weightage

+ Average Rating (B): _____ 40% Weightage = Final Rating (C): _____
• Calculation: $(A \times 0.6) + (B \times 0.4) = C$

If C = [tick appropriate box to confirm Final Rating]:

<input type="checkbox"/> 3.50 – 4.00 Outstanding	<input type="checkbox"/> 1.50 – 2.49 Good
<input type="checkbox"/> 2.50 – 3.49 Very Good	<input type="checkbox"/> 0 – 1.49 Improvement Needed

Name and Signature of Manager

Approval by Chairperson, HR Committee

Comments by the Chairperson, HR Committee:

(Comment on the general performance and potential of the employee)

(Name and Signature of Chairperson, HR Committee)