

COLLEGE OF COASTAL GEORGIA PERFORMANCE EVALUATION FORM SUPERVISOR FORM

Employee's Name:			Department:	
Title:			Employee's ID:	
Date:			Date of Employee's Last Evaluation:	
Evaluator's Name:			Evaluator's Title:	
Next Level Supervisor:			Next Level Supervisor's Title:	
Type of Evaluation: Check a box below		below	Dates Covered by Evaluation:	
Annual	Provisional	Other		

I. PERFORMANCE EVALUATION

Score the performance in each job factor below on a scale of 5-1 as follows:

5 = Outstanding Performance	Employee exceeded all performance expectations. Employee exhibited superior performance and was an outstanding contributor to the success of his/her department and the College of Coastal Georgia. He/she demonstrated role model behaviors		
4 = Exceptional Performance	Employee met all and exceeded most (more than 50%) of the established performance expectations.		
3 = Successful Performance	Employee met all performance expectations and may have exceeded some (less than 50%). Employee was a solid contributor to the success of his/her department and the College of Coastal Georgia.		
2 = Performance Needs Improvement	Employee met most (more than 50%), but failed to meet some performance expectations. Employee needs to further improve in one or more areas of expected job results or behavioral competencies.		
1 = Unsatisfactory Performance	Employee did not meet all or most (more than 50%) of the established performance expectations. Employee needs significant improvement in critical areas of expected job results or behavioral competencies.		

Competency	Performance Score	**Comments Required for all ratings.
Knowledge of Work - Consider employee's skill level, knowledge, and understanding of all phases of the job.		
Quality of Work - Consider the accuracy and thoroughness in completing work assignments. Employee should strive to set high standards for personal performance. Consider the individual's ability to self-identify and correct errors. Take into consideration incomplete assignments. Planning and Organizing - Consider how well the employee defines goals for personal performance. Reflect on how well work tasks are organized and priorities established, and the amount of supervision required to do so. Consider the ability to meet and stay on schedule and the proper use of time.		
Customer Relations - Consider how well the employee interacts in dealing with internal staff, external customers, and vendors. Reflect on how well the employee projects a courteous and professional manner.		
Dependability - Consider how well employee complies with instructions; consider record of attendance and punctuality.		
Self-Initiative - Consider how well employee demonstrates resourcefulness, independent thinking, and the extent to which employee seeks additional challenges and opportunities independently. Consider if employee exhibits ingenuity and initiative in job performance and seeks to create new methods, techniques, and processes.		
Communication – Measure employee's effectiveness in listening to others, expressing ideas both orally and in writing, and providing relevant and timely information to management, co-workers, subordinates and customers.		
Teamwork - Consider how well the employee gets along with colleagues. Reflect on the employee's respect for the rights of other employees and if a cooperative spirit is portrayed.		

ADDITIONAL FACTORS FOR SUPERVISORS:

Competency	Performance Score	**Comments Requ	ired for All Ratings.		
Leadership - Measures effectiveness in accomplishing work assignments through subordinates. Consider if supervisor establishes challenging goals and delegates/coordinates tasks effectively. Reflect on if the supervisor promotes innovation and team effort.					
Developing Subordinates/Mentoring - Measures effectiveness in selecting, training and developing subordinates to function effectively without close supervision. Consider the supervisor's effectiveness in mentoring subordinates and others.					
Decision Making/Problem Solving - Measures effectiveness in understanding problems and making timely, practical decisions.					
II. OVERALL PERFORMANCE					
Overall Performance Rating					
Safety - Consider the employee's contribution to workplace safety through accident prevention, safety awareness, proper care for equipment, and adherence to policies and procedures.	Complies	Does Not Comply	N/A		
III. DEVELOPMENT NEEDS: Contact the Office of Human Resources for resources and consultation on Employee Development.					
Areas where DEVELOPMENT is recommended: Identify job-related competencies that are necessary for this employee to be more effective. Provide appropriate plan to achieve this improvement.					

IV. EMPLOYEE GOALS

Employee and supervisor/evaluator will identify and discuss three goals to be accomplished by the next review. Completion of the goals set forth in this review will be evaluated on next year's Performance Evaluation form and will be a component of the employee's final review rating.

Previous Year Goal 1:	Completed Goal:	Yes	No	
Previous Year Goal 2:	Completed Goal:	Yes	No	
Previous Year Goal 3:	Completed Goal:	Yes	No	
Current Year Goal 1: (attach additional sheets if necessary):				
Current Year Goal 2: (attach additional sheets if necessary):				
Current Year Goal 3: (attach additional sheets if necessary):				

This section gives the opportunity for the employee to identify what professional goals he/she wishes to pursue. Professional goals may or may not be directly related to the employee's current job on campus but would provide professional as well as personal growth. Areas where PROFESSIONAL goals are desired: (ex.educational degree, conference experience, licensure, MS Office or other software training, etc.) VI. ADDITIONAL COMMENTS **Evaluator's Comments (attach additional sheets if necessary):** Employee's Comments (attach additional sheets if necessary): VII. SIGNATURES Evaluator's Signature:_____ Date: _____ Next Level Supervisor's Signature: ______ Date: ______ *Evaluator and Next Level Supervisor signatures must be obtained before conducting review with employee.

My signature indicates that my manager has reviewed this performance appraisal with me, and I was given the opportunity to discuss the official review with the manager. My signature does not necessarily indicate agreement with the ratings. I am aware that I may respond to this evaluation in writing:

Employee's Signature: ______ Date: _____

Attach employee's written response if submitted.

V. EMPLOYEE'S PROFESSIONAL GOALS