



EMPLOYEE NAME (PRINT)

SUPERVISOR NAME (PRINT)

PLANNING SESSION

Signature verifies that performance expectations and goals have been identified and discussed with employee.

Employee Signature * Date (xx/xx/xxxx)

Supervisor Signature & Date (xx/xx/xxxx)

Employee Comments (Optional):

MID-YEAR CHECK-IN

Supervisor/Employee review progress of performance expectations and goals at mid-point of review cycle. Rating of Needs Improvement or Meets Expectations is noted. Signature verifies that performance expectations and goals have been reviewed and discussed with employee.

Needs Improvement

Meets Expectations

Employee Signature * Date (xx/xx/xxxx)

Supervisor Signature & Date (xx/xx/xxxx)

Employee Comments (Optional):

Supervisor Comments (Optional):

YEAR-END SUMMARY EVALUATION / REVIEW

Employee signature confirms that employee's supervisor has discussed this performance evaluation with employee, and that the employee has had the opportunity to respond. It does not represent agreement.

Overall Performance Rating:

NI*

ME

EE

EX

* IF RATING OF NI, SUPERVISOR WILL ESTABLISH A PERFORMANCE IMPROVEMENT PLAN WITH EMPLOYEE

Employee Signature & Date (xx/xx/xxxx)

Supervisor Signature & Date (xx/xx/xxxx)

Director/Manager or Designee Signature & Date (xx/xx/xxxx)

Employee Comments (Optional):

Supervisor Comments (Optional):

Interpreter used Yes

No

If yes, name of service used:

NI = Needs Improvement

ME = Meets Expectations

EE = Exceeds Expectations

EX = Exceptional