



## Staff Performance Review

Name:

Position:

Department:

Was this position held for the entire review period? If not, please indicate Start Date:

**Indicate performance rating and provide comments for each major responsibility. Ratings:**

**Proficient (P)** - Performs work in a fully capable manner meeting all of expected criteria for quality and quantity of work 100% of the time.

**Exceptional (E)** - Performs in a superior manner delivering quality and quantity of work that is substantially above expectations virtually 100% of the time.

**Inconsistent (I)** - Inconsistently meets expectations. Output may need review/rework or may not be the expected volume.

**Needs Improvement (N)** - Has difficulty or does not regularly meet objectives in either quality or quantity of work.

Responsibilities	Rating	Comments/Outcomes/Results

6		

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<b>Job Knowledge / Technical Skills</b> (understands job duties and responsibilities; uses appropriate methods, equipment and materials to accomplish work)		
<b>Productivity</b> (includes quantity of work, meeting goals and expectations, deadlines, prioritizing and fulfilling duties)		
<b>Reliability</b> (shows dependability on the job; fulfills attendance and punctuality requirements)		

**Manager's Additional Comments:**

**Developmental Plans** (May be skills or training needed to address Inconsistent or Needs Improvement performance):

**Staff Member's Comments:**

**Staff Member's Goals & Objectives** (Department/University Goals & Objectives for next performance year):

**Signatures:**

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Dept. Head, Vice President or Dean

Date

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Manager

Date

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Staff Member

Date