This form is to be completed by the supervisor and reviewed with the staff member. Additional information and supplemental resources are located on the [Performance Partnership](http://performance.syr.edu) web page.

|  |  |  |  |
| --- | --- | --- | --- |
| **Staff Member Name:**  |       | **Staff Member SUID #:**  |  |
| **Job Title:**  |  | **Supervisor Name:**  |  |
| **Department:**  |  | **Supervisor SUID #**:  |       |
| **Review Period**:  |       | **Date of Review Meeting:**  |  |

## Section 1: Performance Evaluation

For each of the major responsibilities of the position, list any goals that were set for the review period being evaluated and describe the staff member’s significant accomplishments, including progress on or success in meeting the established goals as well as any other achievements. The major responsibilities should reflect what is recorded in the staff member’s most recent job description or Performance Partnership evaluation. If you need a copy of either or if the staff member’s responsibilities have changed, please email hrcomp@syr.edu for assistance.

|  | **% of time** | **Major Responsibilities** | **Established Goals** | **Accomplishments** |
| --- | --- | --- | --- | --- |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 | 5 | Other position-related duties as assigned |  |  |
|  | 100 | Total |  |  |

Provide additional summary comments regarding the previous year’s performance, including your assessment of the staff member’s technical skills and behavioral competencies. For help, reference the [Competency Library](http://performance.syr.edu/competency-library/) for a list and definitions of competencies and behaviors.

|  |
| --- |
| Summary comments regarding the previous year’s performance:       |

## Section 2: Performance Rating

Evaluate the staff member’s overall performance relative to the expectations of the position and based on information documented in Section 1. **For staff members who have been hired or have taken on a new position during the review period, please skip to the second table below.**

| **Performance** | **Performance Description** |
| --- | --- |
| [ ]   | Consistently Surpasses Expectations | Performance substantially and consistently surpasses expectations of the position. In addition to achieving exemplary day to day performance, individual makes significant contributions well beyond normal job responsibilities; outstanding performance occurs regularly and consistently; outstanding performance. |
| [ ]   | Exceeds Expectations | Performance frequently exceeds expectations of the position. Often excels in demonstrating the knowledge, skills and abilities that result in the effective performance of the position requirements. Job assignments are handled in an extremely competent manner; great performance.  |
| [ ]   | Meets Expectations | Performance meets the expectations of the position. Staff member is fully qualified and competent; job assignments are performed in a manner consistent with performance expectations; good performance.  |
| [ ]   | Does Not Meet All Expectations | Performance is not consistently meeting all expectations of the position. Continued development/improvement is needed; fair performance. |
| [ ]   | Below Expectations | Performance is unacceptable and well below expectations of the position; immediate and continued improvement is required; poor performance.***Conversations with appropriate senior leadership and the Sr. HR Business Partner should occur prior to giving this rating.*** |

For staff members who have been hired or have taken on a new position during the review period, please use the table below.

| **Performance** | **Performance Description** |
| --- | --- |
|[ ]  Exceeds Expectations | Individual has assumed the new role with minimal direction, learns quickly and performs duties assigned in a way that exceeds expectations. Individual has taken on most or all of the core responsibilities of the position. |
| [ ]   | On Track | Individual is actively engaged and improving in the role through an effective learning process.  Individual performs most of the duties assigned in a way that meets expectations.  Individual listens well and seems to be taking the proper initiative. |
| [ ]   | Needs Improvement | Individual requires a significant amount of guidance and attention through the learning process or has been unable to perform the duties assigned in a way that meets expectations. Further improvement is needed.  |

## Section 3: Future Expectations

For each of the major responsibilities of the position, as listed in Section 1, list any SMART goals that have been established for the coming year. For assistance in the creation of goals, reference the [SMART Goal](http://performance.syr.edu/wp-content/uploads/2017/03/SMART_Goal_Worksheet.docx) worksheet. If SMART goals will be established at a later time, please indicate that below in the Supervisor’s Summary Comments section.

|  | **% of time** | **Major Responsibilities** | **Smart Goals** |
| --- | --- | --- | --- |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 | 5 | Other position-related duties as assigned |  |
|  | 100 | Total |  |

**Supervisor’s Summary Comments –** Provide additional comments regarding the expectations for the coming year.

|  |
| --- |
| Supervisor’s Summary Comments:       |

## Section 4: Signatures

1. **Staff Member Acknowledgment:** I have reviewed this document with my supervisor. My signature indicates that I have read it and participated in these discussions, but does not necessarily imply my agreement. Any additional comments or areas of disagreement are noted in the box below. I understand that, upon request, I may receive a copy of the final completed form.

|  |
| --- |
| Additional comments:       |

**Staff Member Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Staff Member Name (Please Print):** \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_ \_

1. **Supervisor Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor Name (Please Print):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once all signatures have been secured, scan this document along with the staff member’s self-assessment, save the document using the following convention, “Staff Member’s SUID Number\_Last Name\_First Name\_2017” (e.g., 555555555\_Doe\_Jane\_2017), and email it to SU Human Resources at performance@syr.edu.