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

**Staff Information** Performance Cycle (check one): \_\_\_ Calendar Year or \_\_\_ Fiscal Year

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

**Section 1: Performance Evaluation – Review of previous SMART Goals – Supervisor and Employee**

Provide summary comments regarding your performance since your last review, including any relevant information, for each of the major responsibilities of the position. List any goals that were set for the review period being evaluated and describe your 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 your 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**(employee completes) | **Established Goals**(employee completes) | **Employee Self-Assessment of Accomplishments** | **Supervisor assessment of Employee Accomplishments** |
| --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 | 5 | Other position-related duties as assigned |  |  |  |
|  | 100 | Total |  |  |  |

**Section 2: Performance Evaluation Summary – Employee**

Provide summary comments regarding your performance since your last review, including any relevant information, including any progress you have made toward improving your diversity, equity, inclusion, and accessibility competencies, e.g., participation in a related workshop, attendance at relevant lectures, panel discussions, or educational forums.

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| --- |
|  |

**Section 3: Performance Evaluation Summary - Supervisor**

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://humanresources.syr.edu/careers/professional-development/performance-partnership/competency-library/) for a list and definitions of competencies and behaviors.

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**Section 4: Future Goals – Employee & Supervisor**

For each of the major responsibilities of your position, as listed in Section 1, draft a minimum of three SMART goals you think may be appropriate 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. At least one goal should be related to diversity, equity, inclusion, and accessibility. Supervisors should review and amend the SMART goals as appropriate in the last column.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **% of time** | **Major Responsibilities** | **Suggested SMART Goals – Employee**  | **Final SMART Goals - Supervisor** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 | 5 | Other position-related duties as assigned |  |  |
|  | 100 | Total |  |  |

**Section 5: Professional Development**

List your professional development goals for the coming year. These goals should reflect the technical skills, knowledge, or behavioral competencies you would like to gain or improve. For each professional development goal, indicate the actions you will take to achieve the goal. Examples may include training, taking a specific class, or serving on a committee.

|  | Professional Development - what skill, knowledge or competency will you gain or improve? | Action Plan – what specific steps will you take to achieve your goal? | Supervisor Support –what Resources are Available to support professional dev?  |
| --- | --- | --- | --- |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

**Section 6: Performance Rating - Supervisor**

Evaluate the staff member’s overall performance relative to the expectations of the position and based on information documented in Section 1 by selecting ONLY ONE RATING. The summary text box can be used for additional explanation. **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** | **Rating**  | **Performance Description** |
| --- | --- | --- |
|  | Exceeds Expectations | Performance frequently exceeds expectations of the position. Often excels in demonstrating the knowledge, skills, and abilities in the 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.*** |

**The review table below is only to be used for staff members who have been hired or have taken on a new position during the review period.**

| **Performance**  | **Rating** | **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.  |

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

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**Section 7: 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.

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

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

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

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

Once all signatures have been secured, save the document using the following convention, “Staff Member’s SUID Number\_Last Name\_First Name\_year” (e.g., 555555555\_Doe\_Jane\_2022), and email it to SU Human Resources at performance@syr.edu.