

FLORIDA ATLANTIC UNIVERSITY - SP PERFORMANCE APPRAISAL

Name: ID #: CLASS TITLE:
Supv Name: SUPV. ID#: Dept. Name:
TYPE OF APPRAISAL:
☐ Annual ☐ Probationary ☐ Special
APPRAISAL PERIOD From: To:

DEFINITION OF PERFORMANCE RATINGS

Outstanding – Performance that is characterized by exceptional accomplishments throughout the rating period and/or performance that is considerably and consistently at a significantly higher level than the established standards.
Exceeds – Performance that, for the majority of the rating period, is of a level higher than the established standards of the position.
Achieves – Performance that successfully accomplishes the established standards of the position
Needs Improvement – Performance that needs improvement in some aspects of the established standards of the position.
Below – Performance that is substandard or incompetent throughout the majority of the rating period and that fails to meet established standards of the position.

CRITICAL ELEMENTS

CRITICAL ELEMENTS are those tasks which the supervisor determined were most important to the overall job performance during this appraisal period. Summarize up to FIVE Critical Elements. Put them in priority order keeping in mind their level of importance and the amount of time spent on each. Assign the rating that most accurately describes the employee's performance.

**PERFORMANCE
RATING**

- 1.
- 2.
- 3.
- 4.
- 5.

PERFORMANCE FACTORS

Performance Factors describe how the employee accomplishes work responsibilities. Assign a rating for each one that is applicable.

**PERFORMANCE
RATING**

1. Willingly accepts responsibility and performs routine and non-routine tasks. Readily accepts instruction and constructive criticism.

COMMENTS:

2. Establishes priorities in order to complete work in a timely manner.

COMMENTS:

3. Anticipates problems and takes appropriate actions.

COMMENTS:

4. Handles all inquiries from both internal and external sources in a professional, courteous and helpful manner. Works with fellow employees to maintain a cooperative atmosphere within department.

COMMENTS:

5. Complies with established work schedule. Does not abuse leave privileges.

COMMENTS:

OVERALL PERFORMANCE RATING

☐ Outstanding ☐ Exceeds ☐ Achieves ☐ Needs Improvement ☐ Below*

****If the overall rating is Below Standards or Needs Improvement, call Employee Relations, Department of Human Resources, 7-2554, before completing performance appraisal process.

I. CAREER DEVELOPMENT (to be completed by the Immediate Supervisor)

A. If appropriate, describe the goals and objectives for the next appraisal period.

B. Comment on employee's strengths as well as areas needing improvement. If performance is below expectations in any area for this appraisal period, what corrective action is recommended?

II. The completed appraisal should be discussed with the higher level supervisor prior to meeting with the employee. This is to insure fairness and consistency in the performance appraisal process.

_____ SIGNATURE OF IMMEDIATE SUPERVISOR	_____ PRINT/TYPE NAME	_____ DATE
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_____ SIGNATURE OF HIGHER LEVEL SUPERVISOR	_____ PRINT/TYPE NAME	_____ DATE
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EMPLOYEE REMARKS:

_____ SIGNATURE OF EMPLOYEE	_____ DATE
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**Signature does not indicate agreement, but only signifies that your supervisor has discussed the appraisal with you and provided you with a copy of the completed appraisal form.*

**Please return completed evaluation to:
Human Resources Department – Administration Building, Room 102**

Original: Human Resources
Copies: Employee and Department
Revised 02/07

