**University of Wisconsin-La Crosse**

Student Affairs

Performance Appraisal Form

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| **Employee’s Name:** | **Class Title:** |
| **Department:** | **Working Title (if appropriate):** |
| **Supervisor’s Name:** | **Period of Review: From: To:** |
| ***COMPLETED FORM IS TO BE RETURNED TO HUMAN RESOURCES WITHIN 30 DAYS FROM THE END OF THE REVIEW PERIOD*** |
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| **Section I. Review previous year’s goals:** The employee and supervisor should review previous year’s goals and provide comment on the achievement of the goals. |
| **Narrative describing achievement of goals from last year:** |
| **Section II. Core Competencies:** Please review the employee’s official position description and contact Human Resources to discuss any questions or discrepancies. Employees must be evaluated on the following core competencies in relation to the tasks and duties described in the position description. |
| Exceeds Expectations -Performance exceeds the expected level of performance in some areas, most of the time. Meets Expectations -Performance meets the expected level of performance in most areas.Needs Improvement  -Performance fails to meet the expected level of performance in significant areas. Action steps/performance objectives need to be identified. |
| **Job Knowledge & Quality*** Demonstrates the knowledge and skills necessary to perform the job and remains current regarding new developments in areas of responsibility.
* Solves difficult problems with effective solutions by asking relevant questions.
* Thinks logically and practically before making decisions.
* Completes assignments in a thorough, accurate and timely manner achieving defined outcomes.
* Handles multiple tasks and uses work time effectively to maximize personal productivity.
 |
| [ ] Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
| **Communication*** Communicate openly, honestly, and respectfully with peers and with customers.
* Effectively expresses ideas and information in oral and written form. Facilitates exchange of ideas, and fosters an atmosphere of open communication.
* Shares information and resources with others as appropriate in a timely manner.
 |
| [ ] Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
| **Inclusivity*** Acknowledges and embraces diversity of thought, opinion, and approach with customers and colleagues regardless of background, culture, and organizational level.
* Works effectively with diverse faculty, staff and students.
* Develops or attends Inclusive Excellence initiatives and trainings.
* Reflected on own identity and identified ways to further personal and professional growth.
 |
| [ ] Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
| **Team Work and Initiative*** Actively contributes to the goals of the unit and works collaboratively to assist others in meeting goals.
* Establishes and maintains effective working relationships with employees within and external to their unit.
* Uses initiative and identifies ways to enhance unit operations and services on an ongoing basis.
* Demonstrates a commitment to self-development and continuous learning.
* Prioritizes responsibilities based upon changing needs of the unit.
 |
| [ ] Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
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| **Leadership*** Fosters and encourages support from the unit or department.
* Inspires confidence and respect in personnel. Motivates employees.
* Promotes respect, honesty, integrity, and fairness.
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| [ ] Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
| **Section III. Additional competencies for supervisory personnel only.** Complete the following if the employee is responsible for supervising staff. This may include the supervision of student workers or temporary employees when supervision is consistent and on-going.  |
| **Supervision and Performance Management*** Clarifies expected behaviors and levels of performance.
* Provides timely feedback and guidance on performance.
* Monitors and evaluates performance progress.
* Provides the necessary information, support and resources for staff to be effective.
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| [ ]  Needs Improvement [ ] Meets Expectations [ ] Exceeds Expectations |
| Employee Comments: |
| Supervisor Comments: |
| **Section IV. Goals for the next year** – Employees are expected to establish goals and objectives for the upcoming year with their supervisor. These goals may be carried forward from the previous year if still applicable, or may be new goals as appropriate. Goal setting should be a participatory process and result in observable, measurable and attainable goals for the upcoming year. In part A below, the employee and supervisor should establish new goals for the following year. Part B should specifically address training and development goals on inclusivity. |
| **Part A: Establishment of upcoming year goals.** |
| **Part B: Training and Development goals including goals on inclusivity:** |
| **Section V. Overall Evaluation.**  |
| **Supervisor Comments:** |
| **Employee comments:** |
| **How clearly do you understand what is expected of you regarding your job performance?**[ ]  Completely clear. I know exactly what is expected of me. [ ]  Usually clear. I seldom have to ask.[ ]  Not clear. I’m never sure of my duties and responsibilities. |
| **Please identify areas your supervisor can provide support to your career and development goals :** |
| **Signatures:** Signature does not imply agreement with appraisal, only that the appraisal was completed.**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Employee’s Signature and Date Print Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Supervisor’s Signature and Date Print Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Division Head’s Signature and Date Print Name |
| Employee refused to sign appraisal:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Supervisor’s Signature and Date** |