

RECORD OF MEETINGS AND DISCUSSIONS

Performance Planning		Date:
	Notes/Comments	
Employee's Signature		
Supervisor's Signature		

Objectives for the evaluation period <i>No more than five</i>	
1.	
2.	
3.	
4.	
5.	

Mid-Period Review		Date:
	Notes/Comments	
Employee's Signature		
Supervisor's Signature		

(This section is OPTIONAL and is used for extra meetings.)

Purpose of Meeting:		Date:
	Notes/Comments	
Employee's Signature		
Supervisor's Signature		

Purpose of Meeting:		Date:
	Notes/Comments	
Employee's Signature		
Supervisor's Signature		