

**Staff Performance Communication and Development Plan**

1. Maintain the original **Performance Communication and Development Plan** document in the departmental file.
2. Send original **Staff Performance Summary Report** to the Office of Human Resources after completion.
3. Make copies of all documents for the employee.

EMPLOYEE INFORMATION	
Name: _____	Empl ID: _____
Job Title: _____	Position #: _____
Department: _____	Department ID: _____
Employment Date: _____	Time in position (years, months) _____
Review Period: _____ to _____	Review: <input type="checkbox"/> Annual <input type="checkbox"/> Other <i>Specify:</i> _____
Manager: _____	
Reviewer: _____	

SECTION 1. PERFORMANCE CRITERIA					
RATINGS: <b>M</b> eets Expectations <b>U</b> nsatisfactory <b>NI</b> Needs Improvement <b>E</b> xceeds expectations <b>NA</b> Not Applicable or Observed					
	M	U	NI	E	NA
<b>Job Results or Achievement of Objectives</b> <i>Accomplishment, includes quality and quantity</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Customer service</b> <i>Focus on customer requirements; courtesy</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Professional conduct</b> <i>Contribution; decision-making within assigned scope</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Initiative</b> <i>Resourcefulness; self-management</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Communication</b> <i>Transmitting ideas and recommendations orally and in writing; listening</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Time and Attendance</b> <i>Present for work as expected.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Health and Safety</b> <i>Uses best practices to assist in ensuring the health and safety of self and others.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
MANAGEMENT AND SUPERVISORY PERFORMANCE CRITERIA					
<b>Leadership</b> <i>Models support for goals, mission and values; inspires, encourages, and rewards commitment and performance.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Financial/Budget Management</b> <i>Uses assigned financial resources efficiently.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Human Resources Management</b> <i>Promotes professional growth and development opportunities for each employee; employees are fully engaged.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SECTION 2. VALUES					
RATINGS: <b>S</b> eldom <b>O</b> ccasionally <b>F</b> requently <b>A</b> lmost Always					
	S	O	F	A	
<b>Respect.</b> <i>Values differences; treats each and every person with fairness.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Teamwork</b> <i>Creates synergy by working together, capitalizing on each person's strengths to provide a collaborative workplace.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Learning</b> <i>Advocates for continuous individual and organizational development.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Service</b> <i>Serves the University by providing systems and processes that are aligned with its strategic objectives.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Accountability</b> <i>Consistently delivers quality services that are dependable and reliable.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Summary Performance Rating** *Transfer this rating to Staff Performance Summary Report.*

Meets Expectations    Unsatisfactory    Needs improvement    Exceeds expectations

Comments:

**Development Plan** *Attach additional sheet(s) as required.*

**Strengths** What elements of performance contributed most to employee's success?

**Areas for development** What areas of performance need to be developed?

**Development Plan** What opportunities will be given employee to demonstrate strengths to broader audience? What actions recommended or taken to improve performance? Indicate responsibility.

**Verification of Review**

**Signing this form does not indicate agreement with this evaluation.** In signing this form, you confirm only that you have discussed this review with your supervisor. You may submit comments about this evaluation within five (5) working days of receipt. Your comments become a permanent part of this document. When this occurs, you may request a ninety (90) day re-evaluation.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Reviewer Signature

\_\_\_\_\_  
Date

Reviewer Comments:

**RECORD OF MEETINGS AND DISCUSSIONS**

<b>Performance Planning</b>		Date:
	<b>Notes/Comments</b>	
Employee's Signature		
Supervisor's Signature		
<b>Objectives for the evaluation period</b> <i>No more than five</i>		
1.		
2.		
3.		
4.		
5.		
<b>Mid-Period Review</b>		Date:
	<b>Notes/Comments</b>	
Employee's Signature		
Supervisor's Signature		
<b>(This section is OPTIONAL and is used for extra meetings.)</b>		
<b>Purpose of Meeting:</b>		Date:
	<b>Notes/Comments</b>	
Employee's Signature		
Supervisor's Signature		
<b>Purpose of Meeting:</b>		Date:
	<b>Notes/Comments</b>	
Employee's Signature		
Supervisor's Signature		

**FEEDBACK AND COACHING LOG**

**Employee:** \_\_\_\_\_ **Evaluation period** \_\_\_\_\_

Date	+/ $\Delta$ *	Situation/Task	Action taken by employee	Result

\* + may be used to indicate that the incident was praiseworthy;  $\Delta$  may indicate a need for correction. The supervisor is encouraged to provide feedback on all incidents recorded; there must be a record of feedback for incidents marked  $\Delta$ .