



## Performance Planning and Feedback

Performance Period: \_\_\_\_\_ to \_\_\_\_\_

Employee First / Middle/ Last Name \_\_\_\_\_

Position Title / Department / Supervisor \_\_\_\_\_

### Phase

Goal Setting ☐

Mid-Year Review ☐

Year-End Evaluation ☐

### Competencies

- 1) Select the 3 – 5 most applicable competencies for this position from the Competency Library.
- 2) Insert the competency in the space provided.
- 3) Rate the employee's performance of that competency and provide comments to support the rating.

|                    | Above<br>Expectations            | Meets<br>Expectations    | Below<br>Expectations    |
|--------------------|----------------------------------|--------------------------|--------------------------|
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |
| <b>Competency:</b> | Rating: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments:          |                                  |                          |                          |

### Department Goals *(defined by Department Head and applicable to all department employees)*

|    |
|----|
| 1. |
| 2. |
| 3. |

### Individual Goals

- 1) Based on top 3-5 job duties, identify up to 3 individual goals for the year.
- 2) Remember to use the SMART model: Specific, Measurable, Actionable, Realistic, Timely.

**Goal 1 Description****Mid-Year Review****Comments/Progress****Year-End Evaluation****Results****Goal 1 Overall Rating (Drop Down):****Goal 2 Description****Mid-Year Review****Comments/Progress****Year-End Evaluation****Results****Goal 2 Overall Rating (Drop Down):****Goal 3 Description****Mid-Year Review****Comments/Progress****Year-End Evaluation****Results****Goal 3 Overall Rating (Drop Down):****Individual Development Plan – Objective 1**

|                          |  |                |  |
|--------------------------|--|----------------|--|
| Development Action       |  |                |  |
| Target Completion Date   |  | Date Completed |  |
| How Learning Was Applied |  |                |  |

**Individual Development Plan – Objective 2**

|                          |  |                        |  |
|--------------------------|--|------------------------|--|
| Development Action       |  |                        |  |
| Target Completion Date   |  | Target Completion Date |  |
| How Learning Was Applied |  |                        |  |

**Career Planning**

*Employee discussion about career goals and what is needed to prepare for those roles. Some employees might be in their career position with no desire to move to another department or role, and that is completely acceptable.*

|   |  |
|---|--|
| Desired Role in 1-2 years:                          |  |
| Desired Role in 3-5 years:                          |  |
| Ultimate Career Goal:                               |  |
| What can/should be done to prepare for these roles? |  |

**Mid-Year Review****Date:**

|   |
|---|
| Outcome / Comments – <i>Employee *attach additional information on separate page if needed.</i> |
|   |
| Outcome / Comments – <i>Supervisor / Evaluator</i>  |
|   |

Date and time of Mid-Year Evaluation:

**Year-End Evaluation****Date:**

|   |
|---|
| Outcome / Comments – <i>Employee *attach additional information on separate page if needed.</i> |
|   |
| Outcome / Comments – <i>Supervisor / Evaluator</i>  |
|   |

**Overall Performance Rating** (drop down):

Date and time of End of Year Evaluation:

Current Wage:

New Wage:

Effective Date:

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Employee

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Date

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Supervisor / Evaluator

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Date

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Human Resources

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Date

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Department Head

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Date