

## **Employee Performance Review**

Please complete, sign and return the original form to the Office of Graduate and International Studies and forward a copy to the Graduate Chair/Coordinator, Faculty Dean and employee.

This form is meant to be an aid to both the employee and the supervisor in discussing the issues surrounding the employee's review. The six factors identified should provide a good starting point for discussion. We would encourage you to discuss these and any additional factors you determine are relevant to the position. Attachments are encouraged. Any concerns regarding the Employee Performance Review may be directed to the Department Chair/Director or the Faculty Dean.

Chail/Director of the Faculty Dean.
FACTOR – QUANTITY OF WORK: Supervisory Comments:
FACTOR – QUALITY OF WORK: Supervisory Comments:
FACTOR – INITIATIVE/WORK HABITS: Supervisory Comments:

**FACTOR – INTERPERSONAL SKILLS:** 

**Supervisory Comments:** 

Supervisory Comments		ON, ADAPTABILITY:	
FACTOR – JOB KNOV Supervisory Comments			
OVERALL PERFORMA	ANCE:		
Unsatisfactory	Fair	Good	Outstanding
SUPERVISORY COMM	MENTS:		
development possibil	ities including	courses, workshops	ons for training and/or and on-the-job training that oment Day or during the
Employee's Signature		Supervisor's	Signature

Signatures indicate that both parties have reviewed the contents of the Employee Performance Review. The employee's signature does not necessarily indicate the employee's agreement with the supervisor's comments.

Return original form to the Office of Graduate and International Studies