

Performance Evaluation Form

Name _____ Job Title _____
 Manager _____ Department _____
 Review Period From _____ To _____

As employees of the University of St. Thomas, we all play an important part in the success of the university. The University will achieve its vision of becoming a great Catholic University by us all working together, performing to the best of our abilities, and remaining true to our core values.

Goodness: *We serve God in faith and love by giving of ourselves to students, colleagues, and society.*

Discipline: *We demand personal responsibility, accountability, and integrity in ourselves and in one another.*

Knowledge: *We pursue truth and academic excellence in the Catholic intellectual tradition, emphasizing the dialogue between faith and reason.*

Community: *We build and nurture relationships that transform our lives, our university, and our world*

Score the performance in each job factor below on a scale of 1 to 5, as follows:

- 5 = Exemplary Performance** – Performs all core job duties at an extraordinary level and demonstrates a consistent mastery in all aspects of duties and responsibilities.
- 4 = Exceeds Expectations** – Performs at a very high level and consistently exceeds the majority of key performance expectations.
- 3 = Achieves Expectations** – Demonstrates a solid level of satisfactory performance on a consistent basis. Meets all requirements of the position and at times may exceed some of them. Completed all assignments, projects and assigned duties in a satisfactory manner with expected results.
- 2 = Needs Improvement** - Meets most requirements of the position although there are times when improvement is needed. Most assignments, projects and assigned duties are completed in a satisfactory manner but not all. Skill levels can improve.
- 1 = Unsatisfactory** – Consistently fails to meet all or most significant job expectations. Significant improvement is required. Continued unsatisfactory performance could result in termination.

Section 1 – Describe key performance objectives, projects and other assigned duties and the results.

What did the employee accomplish and what are the results achieved?

Key performance objectives, assigned duties, projects (<i>Describe key performance objectives and duties for this review period</i>)	Results

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Section 2 – Personal Performance Factors

Rating

- Technical skills and knowledge _____
- Quality of Work - attention to detail/thoroughness/errors _____
- Time Management – uses time well during the day _____
- Organization – organizes work and work area _____
- Communication Skills – writing and oral communication _____
- Attendance & Punctuality – reliability _____
- Interpersonal Skills – works well with all employees _____
- Teamwork – Effectively contributes on teams _____
- Professionalism - appropriate conduct in the work place _____
- Innovation and Creativity – offers ideas and suggestions _____
- Cost conscious – use of supplies, materials and equipment _____
- Compliance with policy and procedures _____
- Service to the University – engaged in UST activities _____

For Managers and Supervisors only (*this category should have significant impact on the supervisor's/manager's overall performance rating*):

- Effectively manages staff (managing staff for results) _____
- Staff development and training (cross training; succession) _____
- Communicates effectively with employees; staff meetings; one on one _____
- Results oriented. Gets things done on time; is proactive. _____
- Performance management including coaching _____
- Budget and financial management _____
- Morale and maintaining a positive work environment _____

Comments on the Section 2 - Personal Performance Factors

Section 3 – Overall Performance (Describe the employee’s overall performance. What are demonstrated strengths and areas for improvement.)

Overall Performance Rating: (*Using the definitions above*) _____

Comments:

Developmental Goals for next review period

1. _____
2. _____
3. _____

Signatures:

Employee _____ **Date** _____

Supervisor/Manager _____ **Date** _____

Department Head _____ **Date** _____

Employee's Comments:

Employees are to receive a copy of the completed and signed performance evaluation form. The original is to be forwarded to Human Resources for placement in the personnel file.