



City of Stamford

"Committed to Equality of Opportunity, Excellence in Results"

PERFORMANCE APPRAISAL

EMPLOYEE NAME (Last) (First) (Initial)			Date of Hire in Current Job
Job Classification Title	Department	Division (if applicable)	Date of Last Review
Purpose of Report (Check One)			
<input type="checkbox"/> Mid-Probation	<input type="checkbox"/> End of Probation	<input type="checkbox"/> Annual Review	
<input type="checkbox"/> Pay Plan Appraisal			

I. JOB PERFORMANCE FACTORS

A. Review the performance factors and definitions.

Using the rating scale, both the employee and supervisor should *CIRCLE* the performance level that is appropriate for each factor.

1 = UNSATISFACTORY 2 = NEEDS IMPROVEMENT 3 = COMPETENT 4 = EXCEEDS EXPECTATION 5 = OUTSTANDING

In the comment section next to each performance factor, give specific examples that will support or clarify the rating give. If a factor is inappropriate for the employee being rated, write NA (Not Applicable) in the comment section.

EMPLOYEE'S COMMENTS	PERFORMANCE FACTORS & DEFINITION	SUPERVISOR'S COMMENTS										
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I. JOB PERFORMANCE FACTORS (Continued)

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D. List other Performance Factors not specified in Part A which may be unique to your department or to the position. Rate the factors in the same manner used for Part A. Avoid factors which are either subjective in nature or irrelevant to the work being performed.

EMPLOYEE'S COMMENTS	PERFORMANCE FACTORS & DEFINITION	SUPERVISOR'S COMMENTS
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Total Average Score: _____		Total Average Score: _____

II. OVERALL PERFORMANCE RATING

Carefully review the criteria for each of the performance levels identified below and check the term which best describes the employee's overall performance for the evaluation period.

EMPLOYEE'S RATING		SUPERVISOR'S RATING
	1. Unsatisfactory: Performance is unacceptable and requires improvement in order to retain the position.	
	2. Needs improvement: Performance is not consistent, and falls short of that expected on most factors. Special review recommended in _____ days	
	3. Competent: Performance generally meets supervisors's expectations on most performance criteria.	
	4. Exceeds Standards: Performance exceeds the supervisor's expectation on nearly all performance factors.	
	5. Outstanding: Exemplary overall performance deserving special recognition; normally occurs in less than 5% of department's total workforce.	

(To be completed by Supervisor)

If overall rating is "Needs Improvement" or "Unsatisfactory", list what action will be taken by both Supervisor and the Employee to correct the problem areas.

.. (To be completed by Supervisor)

Describe the **significant accomplishments** by the employee during this review period:

II. CAREER DEVELOPMENT

Note: Supervisors and Employees *may* mutually agree to complete Section "F" and "G". However, these sections *must* be completed for employees whose positions are considered Technical, Professional, Managerial, and/or Administrative. Section "F" and "G" are *not* to impact on Employees' Overall Performance Rating. If Section "F" and "G" are not completed, please go to Section IV below.

Employee's Career Aspiration. Record here a brief summary of Employee's long-range work interests and career objectives. (This may be a composite of the Employee's stated goals and the Supervisor's observations.)

Employee's Potential for Future. (To be completed by supervisors in consultation with employee.)

Training & Skills	Movement Towards Career Aspirations
List below training and/or classes which Employee has taken since initial hiring. List also other skills the Employee possesses which may or may not be job related:	List below steps which Employee may take to further career aspirations:
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

(Use reverse side for additional comments)

IV. GOALS FOR NEXT PERFORMANCE PERIOD

Written goals for Employee's performance in the next appraisal period have been developed, mutually discussed, and approved by the Supervisor and the Employee. They are recorded elsewhere with working copies retained by both individuals.

YES

NO

A. TO BE COMPLETED BY EMPLOYEE'S SUPERVISOR

I have discussed the contents of this appraisal with the Employee during a scheduled appraisal interview on this date.

Supervisor's Signature

Title

Date

B. TO BE COMPLETED BY EMPLOYEE (Use reverse side if more space is needed)

Comments:

I understand that my signature below only indicates that I have read and discussed the contents of this appraisal with my Supervisor, it does not necessarily imply agreement with the appraisal.

Employee's Signature

Date

C. TO BE COMPLETED BY REVIEWING ADMINISTRATOR

I have reviewed and approved this appraisal.

Administrator's Signature

Date

D. TO BE COMPLETED BY HUMAN RESOURCES DIVISION

I have reviewed this appraisal for completeness and approved it for filing in the Employee's personnel file.

Human Resources Representative

Date