

FY22 200 PAY PLAN: SUPERVISOR EMPLOYEE PERFORMANCE EVALUATION FORM

Employee Name:	Employee ID Number:	
Job Title:	Department:	
Supervisor Name:	Supervisor Title:	
Department Director:	Date of Review:	
Review Period Start Date:	Review Period End Date:	

This form must be completed by the employee's immediate supervisor.

RATING SCALE: Use this scale for all items on this form requiring a numeric rating. A supervisor must develop a performance improvement plan for all areas where an employee received a rating of 1 (Below Standard).

- 1- Does Not Meet Expectations: Does not meet the expectations of the job, task, or project. Improvement Plan Required.
- 2 Needs Improvement:3 Meets Expectations:
- Meets some expectations of the job, task, or project. <u>Improvement Fian Required</u> Successfully and consistently meets the expectations of the job, task, or project.
- 4 Exceeds Expectations: Far exceeds the expectations of the job, task, or project.

PART I: SUPERVISORY LEADERSHIP (50% of overall rating; equally weighted)	RATING
1.Leadership and Development	
•Leadership is clear, undisputed, and supported by team members	
•Handles conflict between team members quickly and effectively	
•Clearly communicates timelines and expectations to team members	
•Facilitates communication to ensure that team members are informed about issues, progress, and next steps	
•Ensures team members have opportunities to develop their skills	
2.Strategic Thinking	
•Understands and uses financial indicators/metrics to measure performance	
•Identifies, recruits, and retains great talent that expands our capability and mirrors our customer base	
3.Drives Excellence	
•Holds employees accountable for performance	
•Communicates with business partners at all levels regularly, accurately, and in detail	
•Focuses on the process and operational consistency to reduce cost, improve performance, and meet targeted budget goals	
4.Decision-Making	
•Causes and underlying issues are analyzed to fully understand situation/ choices prior to decision-making	
•Empowers the team to solve problems and make decisions	
Score = Average of above:	

PART II: EMPLOYEE PERFORMANCE COMPETENCIES (50% of overall rating; equally weighted)	RATING
1. Accountability – Demonstrates a high level of dependability consistently.	
2. Responsibility – Accepts assignments and complies with all authority, regulations, policies, and procedures.	
3. Cooperation – Demonstrates teamwork by maintaining a positive work environment with all stakeholders.	
4. Judgement – Utilizes analytical and constructive reasoning to make sound decisions, logically.	
5. Job Knowledge – Understands job duties, procedures, practices, processes, skills, and related functions.	

6. Quality of Work – Maintains a high standard of work produced and determines ways to improve.		
7. Communication – Committed to expressing themselves clearly in writing and oral communication effectively.		
8. Initiative – Works independently, generating new ideas and uses originality to meet both routine and unusual situations.		
9. Efficiency – Highly productive and maintains a high volume of work meeting deadlines and achieving desired results.		
10. Customer Service – Demonstrates customer service skills effectively to improve performance and/or processes.		
Score = Average of above:		

PART III: GOALS AND RESPONSIBILITIES

A description of the goal and actual performance results that includes any specific performance metric or project deadline met. **GOAL 1:**

Summary of Accomplishment:

GOAL 2:

Summary of Accomplishment:

PART IV: FY 2022 PROFESSIONAL DEVELOPMENT ACCOMPLISHMENTS		
Measure specific Profe	ssional Development achievements.	
Accomplishment 1:		Completion Date:
Accomplishment 2:		Completion Date:

PART V: SUPERVISOR STATEMENT OF OVERALL PERFORMANCE			
Provide a brief description of the employee's overall performance for the review period:			L RATING
4 = Exceeds Expectations 3 = Meets Expectations			
		2 = Needs Improvement	
		1 = Does 1	Not Meet
Complete the following section upon Executive Leadership Team (ELT) Approval			
SUPERVISOR SIGNATURE:		DATE:	
DIRECTOR SIGNATURE:		DATE:	
DIRECTOR SIGNATURE:		DATE:	

Department Level Review -COMPLETE

PART VI: EMPLOYEE COMMENTS AND ACKNOWLEDGEMENT SIGNATURE		
Supervisors should provide employees an opportunity to provide comments. If employee h	as no comments, they should note "none".	
Employee, signing below does not constitute agreement with your performance evalu		
below, you are acknowledging that this performance review has been discussed with	you.	
EMPLOYEE SIGNATURE:	DATE:	
PART VII: SUBMISSION (Required)		
HR Liaison or Designee uploaded completed forms at: DATE:		
http://www.learningcc.org/perform/		

----- DO NOT WRITE BELOW: THIS SECTION FOR OFFICIAL USE BY HUMAN RESOURCE DEPARTMENT ------

APPROVED FOR FILING

LEARNING AND DEVELOPMENT PROCESSING

UNDER REVIEW

EMPLOYEE RELATIONS PROCESSING

RECEIVED DATE: ______ BY: _____

APPROVED DATE: ______ BY: _____

Supporting Documents Attached NOTES: (If any)