|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYEE PERFORMANCE APPRAISAL**  **Fayetteville Technical Community College** | | | | | | | | | | |
| **Employee Name:** | |  | | **Type of Review:** | **Annual**  **Probationary (90 day)**  **Change of Rater** | | | | | |
| **Job Title:** | |  | |  |  | | | | | |
| **Department:** | |  | | **Review Period:** | **From:** |  | | | **To:** |  |
| **Division:** | |  | |  |  | | | | | |
| Throughout the year, both employees and supervisors should refer to the **Employment & Affirmative Action Manual** for an explanation of policies and procedures related to Employee Performance Appraisal. | | | | | | | | | | |
| **At the beginning of the review period, the supervisor and employee must meet to do the following:** | | | | | | | | | | |
|  | Review the job description. | | | | | | | | | |
|  | Establish individual performance objectives for the employee. | | | | | | | | | |
|  | Review the performance dimensions (employability skills and performance attributes) that are critical to the function of this position. | | | | | | | | | |
| **During the review period:** | | | | | | | | | | |
|  | The employee and supervisor should communicate formally and informally as needed. | | | | | | | | | |
|  | The employee and supervisor should review the progress on individual performance objectives. | | | | | | | | | |
| **At the end of the review period:** | | | | | | | | | | |
|  | The employee may evaluate his/her own job performance and provide a copy to his/her supervisor for consideration in the performance appraisal. | | | | | | | | | |
|  | The supervisor must complete this form and provide an overall assessment of the employee’s performance. | | | | | | | | | |
|  | The supervisor reviews the appraisal with the employee. Both the supervisor and employee sign the form and may write comments. | | | | | | | | | |
|  | Both the employee and the supervisor retain a copy of the completed, signed appraisal. | | | | | | | | | |
|  | The supervisor forwards the completed original signed appraisal form through the supervisory chain to the Human Resources Office for filing in the employee’s personnel file. | | | | | | | | | |
| **INITIAL CONFERENCE FOR REVIEW PERIOD** | | | | | | | | | | |
| I have reviewed my job description, individual performance objectives, and performance dimensions with my supervisor. | | | | | | | | | | |
| **Employee’s Signature:** | | |  | | | | **Date:** |  | | |
| **Supervisor’s Signature:** | | |  | | | | **Date:** |  | | |
| **Supervisor’s Printed Name:** | | |  | | | |  |  | | |

|  |  |
| --- | --- |
| **Employee Name:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section 1: Individual Performance Objectives Directions**  At the beginning of the review period, write **three** or more individual performance objectives using the ***SMART*** objective components identified below. **Supervisors must ensure** ***SMART* components are included in each objective.** One objective may reflect personal growth and/or individual work assignments; all objectives should support College initiatives. Progress should be reviewed at mid-year and will be assessed at the end of the review period. At the end of the review period, supervisors will mark one box for each objective: **Achieved, In Progress,** or **Not Achieved**. Supervisors are required to write comments for objectives marked as **In Progress** or **Not Achieved**. | | | | | |
| **Writing Individual Performance Objectives:** use the concept of ***SMART*** objectives by ensuring each objective reflects the following components: | | | | | |
| ***S***pecific:  ***M***easurable:  ***A***ttainable:  ***R***elevant:  ***T***ime-bound: | Who, what, when, where, and how the objective relates to employee’s position and/or institutional goals  How the objective will be measured for success (*numeric or descriptive measure that defines quantity, quality, cost, etc.*)  Realistic, reasonable, within the employee’s control and influence  Expected results of the objective and why those results are important to the mission of the department/institution  Target date/deadline for completion | | | | |
| **Objectives** | | **Steps to Achieve** | **Comments** | | |
| 1. | |  | **Achieved** | **In Progress** | **Not Achieved** |
|  | | |
| 2. | |  | **Achieved** | **In Progress** | **Not Achieved** |
|  | | |
| 3. | |  | **Achieved** | **In Progress** | **Not Achieved** |
|  | | |

|  |  |
| --- | --- |
| **Employee Name:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section 2: Performance Dimensions Directions**  Assess **all six employability skills as each is critical for every position at FTCC**. ***Select* six or more** **performance attributes to be assessed and** **designated as critical**, based on the employee’s critical job duties. At the end of the review period, mark the box in the column that best describes the employee’s performance during the review period for each employability skill and performance attribute selected below. Supervisors are required to write comments for each dimension marked as **Exceeds Expectations** or **Below Expectations**. | | | | | |
| **Exceeds Expectations –** Performance is far above the defined job expectations. The employee consistently does outstanding work, regularly going far beyond what is expected of employees in this job. | | | | | |
| **Meets Expectations –** Performance meets expectations in the majority of areas and is consistently effective and competent. Work output is at the expected level for the position. Most or all tasks are performed with minimal supervision. | | | | | |
| **Below Expectations –** Substantial improvement by the employee is required. | | | | | |
| **Critical** | **Please refer to the Performance Appraisal Manual for definitions of the performance dimensions listed below.** | **Exceeds Expectations** | **Meets Expectations** | **Below Expectations** | **Comments: \*Required for Exceeds or Below Expectations**  **(Note: Please attach additional sheets if needed)** |
| **EMPLOYABILITY SKILLS** | | | | | |
|  | **Responsibility** |  |  |  |  |
|  | **Communication** |  |  |  |
|  | **Adaptability** |  |  |  |
|  | **Teamwork** |  |  |  |
|  | **Problem-Solving** |  |  |  |
|  | **Information Processing** |  |  |  |
| **PERFORMANCE ATTRIBUTES (At least six are to be designated as critical)** | | | | | |
|  | **Classroom Instructional Skills/Knowledge** |  |  |  |  |
|  | **Classroom Management** |  |  |  |
|  | **Classroom Presentation** |  |  |  |
|  | **College Service** |  |  |  |
|  | **Course Management** |  |  |  |
|  | **Customer Service** |  |  |  |
|  | **Developing/Mentoring Others** |  |  |  |
|  | **Employee Development** |  |  |  |
|  | **Facility, Equipment & Supply Management** |  |  |  |
|  | **Initiative** |  |  |  |
|  | **Job Skills/Knowledge** |  |  |  |
|  | **Leadership** |  |  |  |
|  | **Personnel Management/Supervision** |  |  |  |
|  | **Planning/Organization** |  |  |  |
|  | **Professional Development** |  |  |  |
|  | **Program Administration** |  |  |  |
|  | **Quality and Timeliness of Work** |  |  |  |
|  | **Student Advisement** |  |  |  |
|  | **Punctuality** |  |  |  |  |

|  |  |
| --- | --- |
| **Employee Name:** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section 3: End of Review Period/Overall Performance** | | | | | | | | | | | | | | | |
| **Directions for Supervisors:** Mark the box in front of the term that best describes the employee’s overall performance for the review period. While all performance is assessed, the individual performance objectives and the critical performance dimensions are important considerations in the overall appraisal. Student evaluations and classroom observations must be taken into account by faculty supervisors when completing this Employee Performance Appraisal. Supervisors must write comments to substantiate an overall Exceeds Expectations or an overall Below Expectations appraisal. If the employee is rated Below Expectations, a Performance Improvement Plan (PIP) must be attached. | | | | | | | | | | | | | | | |
| **Exceeds Expectations** – Performance is far above the defined job expectations. The employee consistently does outstanding work, regularly going far beyond what is expected of employees in this job. | | | | | | | | | | | | | | | |
| **Meets Expectations** – Performance meets the defined job expectations. The employee performs according to the expectations of doing a good job. The employee is doing the job at the level expected for employees in this position. | | | | | | | | | | | | | | | |
| **Below Expectations** – Substantial improvement by the employee is required as identified in Section 2, Performance Dimensions. While the employee is on a PIP, they are ineligible for pay raises and/or other favorable personnel actions. | | | | | | | | | | | | | | | |
| **Employee serves on Community Boards or Commissions Yes**  **No**  **If yes, which Boards:** | | | | | | | | | | | | | | | |
| **Employee Certification, Comments, and Signature –** My signature below indicates that I have reviewed this document and discussed the comments with my supervisor. It does not necessarily indicate agreement with the evaluation contained in this document; I know that I may provide written comments that will be included in my personnel file. | | | | | | | | | | | | | | | |
| **Employee Comments:** | | | | | | | | | | | | | | | |
|  |  | | | | | |  | |  | **/**     **/** |  | | | | |
| **Signature of Employee:** | | | | | | | | | **Date** | | | | | | |
| **Supervisor Comments:** | | | | | | | | | | | | | | | |
|  |  |  |  | **/**     **/** |  |  | |  | | | |  |  | **/**     **/** |  |
| **Signature of Immediate Supervisor** | | | **Date** | | | **Signature of Supervisor’s Supervisor** | | | | | | | **Date** | | |