

Performance Evaluation Form for Staff Employees

Employee ID Number: 			
Employee's Name:		Employee's Supervisor:	
Employee's Department:	Performance Appraisal Period:		Employee's Payroll Title:
	Begin Date (mm/dd/yy):		
	End Date (mm/dd/yy):		

1. (Required) MANAGER'S ASSESSMENT of PERFORMANCE FACTORS AND ACHIEVEMENT: Please assess applicable performance factors and demonstration of PRIDE Values as they relate to the essential functions of the position you are evaluating by marking the appropriate column for each listed factor. You may enter brief factor-related comments here or incorporate them into your comments in Section 2.

CE – Consistently Exceeds: Consistently exceeds all standards or goals

MA – Meets and Exceeds: Meets all standards or goals and, in many instances, exceeds them

M – Meets All: Meets all standards or goals

PM – Partially Meets: Partially meets minimum standards or goals; improvement needed

FM – Fails to Meet: Fails to meet standards or goals; performance unacceptable

N/A – Not Applicable: enter if the performance factor is not relevant to the position

Performance Factors	Performance Factor Rating (Required)	Comments/Examples (Optional; boxes expand)
Job Knowledge <i>(Demonstrates knowledge of techniques, skills, equipment, procedures and materials. Applies knowledge to identify issues and internal problems; works to develop additional technical knowledge and skills; understands objectives and goals)</i>	Choose a rating	
Quality of Work <i>(Produces accurate, thorough and timely work)</i>	Choose a rating	
Judgment <i>(Utilization of analytical and problem-solving skills; ability to make sound decisions)</i>	Choose a rating	
Communication <i>(Effectiveness in verbal and written communications as well as effective active listening skills. Responds clearly and directly in a timely manner.)</i>	Choose a rating	
Stewardship & Managing Resources <i>(Demonstrates competence, accountability, discretion, and sound judgment in managing resources)</i>	Choose a rating	

Performance Factors	Performance Factor Rating (Required)	Comments/Examples (Optional; boxes expand)
Other Job-Related Factors <i>(Describe below)</i> <i>Note: refer to career tracks job standards for consideration of additional competencies. Supervisory factors may also be added here.</i>	Choose a rating	

2. (Required) Manager's assessment of UCSF's PRIDE Values (Professionalism, Respect, Integrity, Diversity and Excellence): Please assess how these important core values are demonstrated by the employee.

Performance Factors	Performance Factor Rating (Required)	Comments/Examples (Optional; boxes expand)
Professionalism <i>(Competent, accountable, reliable, and responsible in work habits; interacts positively and collaboratively with all colleagues, faculty, students, patients, visitors, business partners and customers)</i>	Choose a rating	
Respect <i>(Courteous, kind and acting with utmost consideration for others)</i>	Choose a rating	
Integrity <i>(Honest, trustworthy and ethical; strives to always do the right thing without comprising the truth; fair and sincere)</i>	Choose a rating	
Diversity <i>(Supports an environment of equity and inclusion with opportunities for everyone to reach their own potential. Demonstrates respect for the variety of experiences and perspectives, which arise from differences in race, culture, religion, mental or physical abilities, heritage, age, gender, sexual orientation and other characteristics.)</i>	Choose a rating	
Excellence <i>(Dedicated, motivated, innovative and shows leadership by supporting a culture of continuous improvement and encouraging and motivating others to excel.)</i>	Choose a rating	

3. (Required) MANAGER'S COMMENTS ON OVERALL PERFORMANCE: Please provide comments on accomplishments/strengths and areas of improvement, as it relates to the employee's performance of job duties, PRIDE Values, and adherence to expectations:

Manager's Overall Comments *(box will expand to fit all comments):*

4. (Optional) EMPLOYEE'S DEVELOPMENT PLAN: Employee should describe their development plan for the coming year, how you plan to complete the development, and how successful completion will be measured:

<u>Development Item / Area</u>	<u>How Will the Plan be Completed?</u>	<u>How Will Success be Measured?</u>

5. (Optional) EMPLOYEE'S COMMENTS ON PERFORMANCE: Please provide any comments related to this performance appraisal.

Employee's Comments *(box will expand to fit all comments):*

6. (Required) Overall Appraisal Rating (select only one):

- ☐ CE / Consistently Exceeds all Standards or Goals
- ☐ MA / Meets All Standards or Goals and, in many instances, exceeds them
- ☐ M / Meets all Standards or Goals
- ☐ PM / Partially Meets minimum standards or goals; improvement needed
- ☐ FM / Fails to Meet standards or goals; performance unacceptable

7. Performance Evaluation Signatures and Dates

Supervisor Signature and Date

Employee Signature and Date

Department Authority Signature and Date