

PERFORMANCE EVALUATION RATING FORM

Employee's Name _____

ID Number _____

This section is to be completed when Standards are established at beginning of the rating period.

These standards were established in consultation with the employee named above.

Supervisor's Signature _____ Date _____

I have reviewed these standards and understand my performance will be measured against them.

Employee's Signature _____ Date _____

I have reviewed these standards and agree that they are appropriate for the position.

Reviewing Official _____ Date _____

This section is to be completed at conclusion of the rating period.

My supervisor and I have reviewed my performance evaluation. My comments on the evaluation are as follows:
(Additional pages may be attached if necessary.)

Employee's Signature _____ Date _____

(NOTE: Signature does not necessarily mean agreement)

My employee and I have reviewed the employee's evaluation and all attachments.

Supervisor's Signature _____ Date _____

I have reviewed the employee's performance evaluation and all attachments.

Reviewing Official _____ Date _____