# Performance Appraisal of Administrative and Professional Personnel

### PURPOSE

The purpose of any performance appraisal program is employee development. The value of performance appraisal is in the process of communication between supervisor and employee and not merely in the completion of the form.

Specific objectives of UTD's Administrative and Professional Appraisal program are-

- to increase professional development, skill level, and performance of each employee;
- to strengthen working relationships between supervisor and employee;
- to clarify job duties and responsibilities;
- to establish mutually understood standards for measuring performance;
- to aid in promotion, retention and salary decisions.

# PREPARATION

*For the reviewer*: review the appraisal guideline's manual. Complete all four parts of this performance appraisal in advance of your conference with the employee and be prepared to discuss it in detail.

*For the employee being reviewed*: one week prior to your review, you will be given a blank appraisal form. Your completion of this form will serve as a self-evaluation and acquaint you with the performance factors to be evaluated.

### THE APPRAISAL FORM

- Part I Appraisal Factors (instructions are self-explanatory)
- Part II Review Summary Sheet (includes overall summary and appropriate signatures)

### DISTRIBUTION OF COMPLETED FORM

- Original retained with reviewing supervisor (for periodic reference prior to next review)
- Copy to employee
- Copy of Section II to Human Resources



EMPLOYEE NAME	REVIEW DATE
POSITION TITLE	ADMIN UNIT NAME

#### I. APPRAISAL FACTORS

**INSTRUCTIONS:** Consider all performance factors as they relate to the individual's **Internal Control** responsibilities. Listed below are performance appraisal factors, which are considered representative of most administrative and professional positions. A brief description is provided for each factor. In the space provided for each factor, the reviewer should place descriptive evaluative comments. After noting appraisal comments, proceed to select an overall rating for the factor and **place a check in the box that represents the appropriate summary evaluation.** 

1. 2.

	] 5 [	6	7					
Consistently Below Expectations3. Occasionally Below EFrequently Below Expectations4. Meets Expectations	Expecta	tions	6.	Freque	ntly Exe	ceeds Ex	Expectati spectation Expectat	15
<b>LEADERSHIP</b> (motivation, counseling, and directing of staff)	1	2	3	4	5	6	7	
<b>DECISION MAKING</b> (reaching firm, clearly defined decisions)	1	2	3	4	5	6	7 🗌	
<b>PLANNING</b> (preparation of administrative unit programs, activities, and services)	1	2	3	4	5	6	7 🗌	
<b>STAFF MANAGEMENT</b> (employee selection, retention, development and appraisal)	1	2	3	4	5	6	7 🗌	

FISCAL MANAGEMENT 1 2 3 4 5 6 7   (utilization of resources, safeguarding UTD assets effective Internal Controls, Software/data security) 6 7 7							
HUMAN RELATIONS (Interpersonal relations with internal and external constituents)	1	2	3	4	5	6	7
COMMUNICATION (verbal and written)	1	2	3	4	5	6	7
PROFESSIONAL EXPERTISE (job knowledge)	1	2	3	4	5	6	7
SPECIAL PROJECTS (if applicable, please identify)	1	2	3	4	5	6	7

# II. REVIEW SUMMARY SHEET

EMPLOYEE NAME	REVIEW DATE
POSITION TITLE	ADMIN UNIT NAME
Performance Strengths:	Areas for Improvement:
<b>OVERALL EVALUATION:</b> (check one and/o	r provide written summary in space below)
	5 🗌 6 🗌 7 🗌
1. Consistently Below Requirements3. Occasionally Below Red2. Frequently Below Requirements4. Meets requirements	quirements5. Occasionally Exceeds Requirements6. Frequently Exceeds Requirements7. Consistently Exceeds Requirements
OBSERVATIONS:	
	UNDERSTOOD GOALS e supervisor can do to achieve the stated goals)
<b>NOTE TO EMPLOYEE:</b> The employee can, at a later date, supply with a copy to Human Resources to be attached to the personnel file	
SIGNATURES:	
Employee Signature:	Date
(My signature above indicates I have reviewed this performance appraisal a supervisor or his/her designee. My signature also means that I have been ac imply that I agree with the evaluation.)	
Supervisor's signature	Date
Administrative review	Date

Distribution: Original remains in Admin Unit; full copy to employee; copy of Section II to Human Resources.