


<b>Date:</b>			
<b>Employee:</b>		<b>Employee UTD-ID:</b>	
<b>Admin Area:</b>		<b>Position:</b>	
<b>Interviewing Supervisor:</b>			
<b>Evaluation Period:</b> to			
<p>In accordance with the University Probationary Period policy (D2-120.4) this form is designed to assist with the evaluation of your new employee's progress during his/her six (6) month probationary period. During the review period, the form should be completed and reviewed with the employee at 1, 3, and 6 month intervals. New employees are informed of this review process during their HR orientation.</p> <p>Return a copy of the form to Human Resources, mail station AD10, after the 1 and 3 month evaluations. At the end of the 6 month evaluation, send the original form to Human Resources.</p> <p><b>TIMELY COMPLETION OF THIS FORM WILL ASSIST YOU IN DEVELOPING THE NEW EMPLOYEE, OR IN SOME CASES, DETERMINING THAT AN EMPLOYEE IS NOT SUITABLE FOR CONTINUED EMPLOYMENT.</b></p>			
 <p><b>New Employee Evaluation Form</b></p>			
<b>FIRST MONTH EVALUATION TO BE COMPLETED BY:</b>			
Performance Standards	Fails to Meet Job Standards	Meets Job Standards	Exceeds Job Standards
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
Specific corrective action has been outlined and provided to the employee - <input type="checkbox"/> Yes    N/A <input type="checkbox"/>			
Recommendation: <input type="checkbox"/> Continue employment with UTD <input type="checkbox"/> Terminate effective			
Supervisor Signature:		Date:	
Employee Signature:		Date	
<b>THIRD MONTH EVALUATION TO BE COMPLETED BY:</b>			
Performance Standards	Fails to Meet Job Standards	Meets Job Standards	Exceeds Job Standards
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
Specific corrective action has been outlined and provided to the employee - <input type="checkbox"/> Yes            N/A <input type="checkbox"/>			
Recommendation: <input type="checkbox"/> Continue employment with UTD <input type="checkbox"/> Terminate effective			
Supervisor Signature:		Date:	
Employee Signature:		Date	

<b>Employee:</b>		<b>Employee UTD-ID:</b>	
<b>Admin Area:</b>		<b>Position:</b>	
<b>SIXTH MONTH EVALUATION TO BE COMPLETED BY:</b>			
Performance Standards	Fails to Meet Job Standards	Meets Job Standards	Exceeds Job Standards
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
Specific corrective action has been outlined and provided to the employee - <input type="checkbox"/> Yes      N/A <input type="checkbox"/>			
Recommendation: <input type="checkbox"/> Continue employment with UTD <input type="checkbox"/> Terminate effective			
Supervisor Signature:		Date:	
Employee Signature:		Date	

<p><b>The University of Texas at Dallas</b>  Office of Human Resources  P O Box 830688  Richardson, TX 75083-0688  Fax 972-883-2156  <a href="http://www.utdallas.edu/utdgeneral/business/hr/">http://www.utdallas.edu/utdgeneral/business/hr/</a></p>
<b>UTD Office Use Only:</b>

# **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



The University of Texas at Dallas

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  3  4  5  6  7

- 1. Consistently Below Expectations
- 2. Frequently Below Expectations
- 3. Occasionally Below Expectations
- 4. Meets Expectations
- 5. Occasionally Exceeds Expectations
- 6. Frequently Exceeds Expectations
- 7. Consistently Exceeds Expectations

<b>LEADERSHIP</b> (motivation, counseling, and directing of staff)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
<b>DECISION MAKING</b> (reaching firm, clearly defined decisions)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
<b>PLANNING</b> (preparation of administrative unit programs, activities, and services)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
<b>STAFF MANAGEMENT</b> (employee selection, retention, development and appraisal)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

**FISCAL MANAGEMENT**1  2  3  4  5  6  7 

(utilization of resources, safeguarding UTD assets effective Internal Controls, Software/data security)

**HUMAN RELATIONS**1  2  3  4  5  6  7 

(Interpersonal relations with internal and external constituents)

**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:

_____	_____
_____	_____
_____	_____
_____	_____

**OVERALL EVALUATION:** (check one and/or provide written summary in space below)

1  2  3  4  5  6  7

- |                                    |                                    |                                      |
|------------------------------------|------------------------------------|--------------------------------------|
| 1. Consistently Below Requirements | 3. Occasionally Below Requirements | 5. Occasionally Exceeds Requirements |
| 2. Frequently Below Requirements   | 4. Meets requirements              | 6. Frequently Exceeds Requirements   |
|                                    |                                    | 7. Consistently Exceeds Requirements |

OBSERVATIONS:

### MUTUALLY UNDERSTOOD GOALS

(Include what the employee and the supervisor can do to achieve the stated goals)

**NOTE TO EMPLOYEE:** The employee can, at a later date, supply the supervisor and his/her additional written comments with a copy to Human Resources to be attached to the personnel file copy of this summary page.

### SIGNATURES:

Employee Signature: \_\_\_\_\_ Date \_\_\_\_\_

(My signature above indicates I have reviewed this performance appraisal and have discussed the contents with my immediate supervisor or his/her designee. My signature also means that I have been advised of my performance and does not necessarily 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.*

# Performance Appraisal of Classified 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 Classified Performance 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 performances;
- ◆ to aid in promotion, retention and salary decisions.

## PREPARATION

*For the reviewer:* review the appraisal guideline manual. Complete all three 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

- Section I Appraisal Factors (Select the most appropriate statements)
- Section II Supervisory/Management Personnel Only (Only those CLASSIFIED employees with supervisory responsibilities should be reviewed in this section)
- Section III 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 III to Human Resources



The University of Texas at Dallas

EMPLOYEE NAME \_\_\_\_\_

ADMIN. UNIT \_\_\_\_\_ REVIEW DATE \_\_\_\_\_

JOB TITLE \_\_\_\_\_

1  2  3  4  5  6  7

**Key to Ratings**

- 1. Consistently Below Expectations
- 2. Frequently Below Expectations
- 3. Occasionally Below Expectations
- 4. Meets Expectations
- 5. Occasionally Exceeds Expectations
- 6. Frequently Exceeds Expectations
- 7. Consistently Exceeds Expectations

**I. APPRAISAL FACTORS**

Consider all performance factors as they relate to the individual's **Internal Control** responsibilities

**A. JOB KNOWLEDGE (knowledge of duties and responsibilities of position)**

Check all that apply and provide narrative of specific examples:

- |   |   |
|---|---|
| <input type="checkbox"/> Unable to complete job duties          | <input type="checkbox"/> Poor understanding of job        |
| <input type="checkbox"/> Lacks knowledge of some phases of work | <input type="checkbox"/> Able to learn new aspects of job |
| <input type="checkbox"/> Has adequate grasp of job requirements | <input type="checkbox"/> Most job duties mastered         |
| <input type="checkbox"/> Understands all phases of work         | <input type="checkbox"/> Strives to learn more,           |
| <input type="checkbox"/> Has completely mastered job            | <input type="checkbox"/> Strives to improve job skills    |
|   | <input type="checkbox"/> Others (describe below)          |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS:

OVERALL RATING FOR PERFORMANCE **FACTOR A:** (CHECK ONE) 1  2  3  4  5  6  7

**B. QUALITY WORK (correctness, completeness, and accuracy of work duties performed)**

Check all that apply and provide narrative of specific examples:

- |   |   |
|---|---|
| <input type="checkbox"/> Requires minimum of supervision    | <input type="checkbox"/> Makes minimum number of mistakes                 |
| <input type="checkbox"/> Consistently thorough and accurate | <input type="checkbox"/> Makes above average number of errors             |
| <input type="checkbox"/> Exact and precise most of the time | <input type="checkbox"/> Final product often needs revision or correction |
| <input type="checkbox"/> Seldom makes errors                | <input type="checkbox"/> Makes frequent and recurrent errors              |
| <input type="checkbox"/> Usually accurate                   | <input type="checkbox"/> Others (describe below)                          |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS:

OVERALL RATING FOR PERFORMANCE **FACTOR B:** (CHECK ONE) 1  2  3  4  5  6  7



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**C. QUANTITY OF WORK (amount of work done during workday)**

Check all that apply and provide narrative of specific examples:

- |   |  |
|---|--|
| <input type="checkbox"/> Minimum requirements not met               | <input type="checkbox"/> When situation requires, production increases |
| <input type="checkbox"/> Volume of work generally unsatisfactory    | <input type="checkbox"/> Volume of work frequently above that expected |
| <input type="checkbox"/> Volume is generally below what is expected | <input type="checkbox"/> Produces consistently high volume of work     |
| <input type="checkbox"/> Does just enough to get by                 | <input type="checkbox"/> Extremely productive and fast                 |
| <input type="checkbox"/> Volume meets job requirements              | <input type="checkbox"/> Other (describe below)                        |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS:

OVERALL RATING FOR PERFORMANCE **FACTOR C**: (CHECK ONE) 1  2  3  4  5  6  7

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**D. RESPONSIBILITY AND DEPENDABILITY (Willingness to take on assignments and be held accountable)**

Check all that apply and provide narrative of specific examples:

- |  |   |
|--|---|
| <input type="checkbox"/> Requires minimum of supervision | <input type="checkbox"/> Usually takes care of tasks with reasonable promptness |
| <input type="checkbox"/> Seeks additional responsibility | <input type="checkbox"/> Often fails to meet deadlines                          |
| <input type="checkbox"/> Very reliable                   | <input type="checkbox"/> Unreliable, requires close supervision                 |
| <input type="checkbox"/> Reliable                        | <input type="checkbox"/> Does not accept responsibility                         |
| <input type="checkbox"/> Carries through effectively     | <input type="checkbox"/> Other (describe below)                                 |
| <input type="checkbox"/> Frequently requires prompting   |   |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS

OVERALL RATING FOR PERFORMANCE **FACTOR D**: (CHECK ONE) 1  2  3  4  5  6  7

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**E. ATTENDANCE AND PUNCTUALITY (conformity to work hours; timely attendance at meetings)**

Check all that apply and provide narrative of specific examples:

- |   |   |
|---|---|
| <input type="checkbox"/> Absent often                         | <input type="checkbox"/> Usually present and on time              |
| <input type="checkbox"/> Frequently late                      | <input type="checkbox"/> Very prompt                              |
| <input type="checkbox"/> Chronic offender                     | <input type="checkbox"/> Responsibility toward regular attendance |
| <input type="checkbox"/> Lax in attendance or reporting time  | <input type="checkbox"/> Always dependable                        |
| <input type="checkbox"/> Allows personal factors to interfere | <input type="checkbox"/> Other (describe below)                   |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS

OVERALL RATING FOR PERFORMANCE **FACTOR E**: (CHECK ONE) 1  2  3  4  5  6  7

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**F. INTERPERSONAL RELATIONS (communication and cooperation with fellow employees)**

Check all that apply and provide narrative of specific examples:

- |  |   |
|--|---|
| <input type="checkbox"/> Goes out of way to promote good interpersonal relations | <input type="checkbox"/> Sometimes rigid and defensive            |
| <input type="checkbox"/> Very cooperative  | <input type="checkbox"/> Does not foster good working environment |
| <input type="checkbox"/> Effectively handles difficult interpersonal relations   | <input type="checkbox"/> Fails to consider others                 |
| <input type="checkbox"/> Adapts self to others and to most situations            | <input type="checkbox"/> Not courteous; lacks understanding       |
| <input type="checkbox"/> Seeks guidance when needed                              | <input type="checkbox"/> Other (describe below)                   |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS

OVERALL RATING FOR PERFORMANCE **FACTOR F**: (CHECK ONE) 1  2  3  4  5  6  7

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**G. EFFECTIVE USE OF TIME (ability to organize, prioritize and schedule)**

Check all that apply and provide narrative of specific examples:

- |  |   |
|--|---|
| <input type="checkbox"/> Ineffective in routine tasks                              | <input type="checkbox"/> Plans skillfully   |
| <input type="checkbox"/> Cannot plan or schedule                                   | <input type="checkbox"/> Handles unusual situations                                     |
| <input type="checkbox"/> Difficulty in determining priority and schedule of duties | <input type="checkbox"/> Extremely capable in coordinating tasks in changing situations |
| <input type="checkbox"/> Completes assignments within time expected                | <input type="checkbox"/> Other (describe below)   |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS:

OVERALL RATING FOR PERFORMANCE **FACTOR G**: (CHECK ONE) 1  2  3  4  5  6  7

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**H. INITIATIVE (origination and development of vital job procedures)**

Check all that apply and provide narrative of specific examples:

- |   |   |
|---|---|
| <input type="checkbox"/> Develops new ideas and methods to improve quality of results | <input type="checkbox"/> Shows little interest in current practices relating to job |
| <input type="checkbox"/> Seeks additional knowledge pertaining to the job             | <input type="checkbox"/> Unwilling to demonstrate interest in gaining new knowledge |
| <input type="checkbox"/> Follows formal instructions as necessary                     | <input type="checkbox"/> Other (describe below)                                     |

SPECIFIC EXAMPLES/COMMENTS/OBSERVATIONS:

OVERALL RATING FOR PERFORMANCE **FACTOR H**: (CHECK ONE) 1  2  3  4  5  6  7

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## II. COMPLETE FOR SUPERVISORY/MANAGEMENT PERSONNEL ONLY

INSTRUCTIONS Listed below are five performance appraisal factors that are considered representative of classified positions (i.e. pay class codes 1000 or greater) requiring supervisory/managerial responsibility. A brief description is provided for each factor. In the space provided, the reviewer should place words or phrases that most appropriately describe the employee's ability to perform the supervisory/managerial function.

A. **LEADERSHIP** Consider this supervisor's ability to motivate subordinates and co-workers, to foster high morale/satisfaction, and to apply policy fairly.

B. **COMMUNICATION SKILLS** Consider this supervisor's ability to keep you informed and to communicate (both written and verbal) effectively with peers and subordinates.

C. **DECISION MAKING** Consider this supervisor's ability to identify problems, gather and organize facts, evaluate, and make an effective final decision

D. **STAFF DEVELOPMENT** Consider how well this supervisor promotes the personal and professional growth of staff. Also consider how well responsibility and authority are delegated to promote productivity.

E. **PLANNING AND IMPLEMENTATION** Consider this supervisor's ability to plan, utilize resources (e.g., time, money, facilities, materials, equipment, employees' skills, etc), and accomplish objectives.

F. **INTERNAL CONTROLS** Consider this supervisor's demonstrated commitment to Internal Controls including support of sound financial condition of the admin unit & overall good business practices.

### III. REVIEW SUMMARY SHEET

EMPLOYEE NAME \_\_\_\_\_ REVIEW DATE \_\_\_\_\_

POSITION TITLE \_\_\_\_\_ ADMIN UNIT NAME \_\_\_\_\_

Performance Strengths:

Areas for Improvement:

_____	_____
_____	_____
_____	_____
_____	_____

**OVERALL EVALUATION:** (check one and/or provide written summary in space below)

1  2  3  4  5  6  7

- |                                    |                                    |                                      |
|------------------------------------|------------------------------------|--------------------------------------|
| 1. Consistently Below Requirements | 3. Occasionally Below Requirements | 5. Occasionally Exceeds Requirements |
| 2. Frequently Below Requirements   | 4. Meets requirements              | 6. Frequently Exceeds Requirements   |
|                                    |                                    | 7. Consistently Exceeds Requirements |

OBSERVATIONS:

#### MUTUALLY UNDERSTOOD GOALS

(Include what the employee and the supervisor can do to achieve the stated goals)

**NOTE TO EMPLOYEE:** The employee can, at a later date, supply the supervisor and his/her additional written comments with a copy to Human Resources to be attached to the personnel file copy of this summary page.

#### SIGNATURES:

Employee Signature: \_\_\_\_\_ Date \_\_\_\_\_

(My signature above indicates I have reviewed this performance appraisal and have discussed the contents with my immediate supervisor or his/her designee. My signature also means that I have been advised of my performance and does not necessarily 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 III to Human Resources.*