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MANAGERIAL PERFORMANCE APPRAISAL

Review Period Covered:

Date of Review: _____

From: ____ / ____ / ____ To: ____ / ____ / ____
Month/Day/Year Month/Day/Year

Review Type: ☐ 90 Day ☐ Annual/Semi-Annual ☐ Other (Specify) _____

Name: _____

Title: _____ Department: _____

Length of Time in Position: _____

Reviewer Name: _____

Title: _____ Department: _____

RATING OF PERFORMANCE CHARACTERISTICS

C **COMMENDABLE:** Consistently exceeds job requirements.

V **VERY GOOD:** Often exceeds job requirements.

G **GOOD:** Consistently meets job requirements and performance standards of job.

NI **NEEDS IMPROVEMENT:** Does not meet job standards for important requirements; needs to acquire additional knowledge and/or skill to perform some job elements.

MANAGERIAL KNOWLEDGE:

Comprehends supervisory/management skills and techniques and applies them appropriately.

C ☐ _____
V ☐ _____
G ☐ _____
NI ☐ _____

DELEGATION:

Gets work accomplished through and with other staff. Assigns work and authority commensurate with subordinates' capabilities.

C ☐ _____
V ☐ _____
G ☐ _____
NI ☐ _____

COMMUNICATION:

Establishes an atmosphere that encourages direct discussion and problem solving. Establishes two-way communication. Listens to and considers the ideas and suggestions of staff.

C ☐ _____
V ☐ _____
G ☐ _____
NI ☐ _____

EMPLOYEE EVALUATION/DEVELOPMENT:

Provides ongoing and timely performance feedback. Writes and conducts constructive, objective performance reviews. Establishes challenging but attainable goals for self and others.

C ☐ _____
V ☐ _____
G ☐ _____
NI ☐ _____

TRAINING:

Provides coaching and technical information to develop subordinates' abilities. Establishes career development plans for subordinates.

C ☐ _____
V ☐ _____
G ☐ _____
NI ☐ _____

PLANNING:

Plans work for self and department; establishes and changes priorities; and accomplishes job responsibilities and work assignments within expected timeframes.

C	<input type="checkbox"/>	_____
V	<input type="checkbox"/>	_____
G	<input type="checkbox"/>	_____
NI	<input type="checkbox"/>	_____

BUDGETING ABILITY:

Develops and monitors budgets proceciently; anticipates and adjusts for variances.

C	<input type="checkbox"/>	_____
V	<input type="checkbox"/>	_____
G	<input type="checkbox"/>	_____
NI	<input type="checkbox"/>	_____

LEADERSHIP:

Directs and inspires the work of others. Encourages staff initiative.

C	<input type="checkbox"/>	_____
V	<input type="checkbox"/>	_____
G	<input type="checkbox"/>	_____
NI	<input type="checkbox"/>	_____

OTHER PERFORMANCE ASPECTS

Detail other aspects of the employee’s performance as a manager, including accomplishments of the employee and the department.

PLEASE ATTACH ADDITIONAL SHEETS OF PAPER IF NECESSARY.

OVERALL RATING: ☐ **COMMENDABLE** ☐ **VERY GOOD** ☐ **GOOD** ☐ **NEEDS IMPROVEMENT**

Employee Signature: _____ Date: _____

Reviewer Signature: _____ Date: _____

Attachments: ☐ Employee Activity Report ☐ Performance Appraisal ☐ Supplemental Pages ☐ None