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| STATE OF NEW YORK  Professional, Scientific, and Technical Services Unit | | | | | | | | | PERFORMANCE EVALUATION PROGRAM  PART II: PERFORMANCE APPRAISAL AND RATING  (See instructions on reverse side) | | | | | |
| Agency | |  | | | | | | | |  | | | | |
| **SECTION 1 – EMPLOYEE IDENTIFICATION** | | | | | | | | | | | | | | |
| Employee’s Name | | | | |  | | Division/Facility | | | |  | | | |
| Social Security Number | | | | | |  | Section | |  | | | | | |
| Title |  | | | | | | Salary Grade | | | |  | Item Number | |  |
| Supervisor/Rater | | | |  | | | Rater Title | | |  | | | | |
| Reviewer | | |  | | | | Reviewer Title | | | |  | | | |
| Evaluation Period From | | | | | |  | To |  | | | | |
|  | | | | | | (mo/day/yr) |  | (mo/day/yr) | | | | |  | |
| **SECTION 2 – SUMMARY OF ACTUAL PERFORMANCE**. Describe the employee’s performance in accomplishing tasks or achieving objectives specified in Part I, Section 2A. Explain how the employee’s performance has either exceeded or not met the performance standards. Be as specific and quantitative as possible. | | | | | | | | | | | | | | |
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| 1. | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | | |
| 7. | | | | | | | | | | | | | | |
| (Attach additional sheets if necessary) | | | | | | | | | | | | | | |
| **SECTION 3 – RECOMMENDED TRAINING, DEVELOPMENT AND PERFORMANCE IMPROVEMENT ACTIVITIES**   * Note that in many instances, the implementation of recommended performance improvement activities may result in the assignment of more complex   Tasks/objectives appropriate to the employee’s title. If so, the performance program should reflect these revised assignments. | | | | | | | | | | | | | | |
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(4/94)

Reprinted 7/97

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| **SECTION 4 – PERFORMANCE RATING** | | | |
| * Check the rating which best summarized the employee’s performance, as described in Section 2. Refer to descriptions of ratings below. | | | |
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|  |  |  |
| SATISFACTORY | UNSATISFACTORY |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SUPERVISOR | | |  | | | | | | SIGNATURE | |  | | | | | DATE |  | |
|  | | | | | | | | | | | | | | | | | | |
| REVIEWER | |  | | | | | | | SIGNATURE | |  | | | | | DATE |  | |
|  | | | | |  | | |  | | | |  | |  | | | |  |
| **SECTION 5 - CERTIFICATION** | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | |  | | | |  | |  | | | |  |
| I MET WITH MY SUPERVISOR ON | | | | | | |  | | | TO DISCUSS MY JOB PERFORMANCE. I HAVE HAD AN OPPORTUNITY TO READ THIS | | | | | | | | |
| REPORT AND DISCUSS IT WITH MY SUPERVISOR. MY SIGNATURE DOES NOT NECESSARILY SIGNIFY AGREEMENT. | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| EMPLOYEE SIGNATURE | | | | | |  | | | | | | | DATE | |  | | | |
|  | | | CHECK IF EMPLOYEE COMMENTS ARE ATTACHED. | | | | | | | | |  | |  | | | |
|  | | | | | |  | | | | | | |  | |  | | | |
| NOTE: If the rating is Unsatisfactory and you wish to appeal, you have 15 calendar days from receipt of the rating to submit an appeal. Contact your Personnel Office for specific procedures. | | | | | | | | | | | | | | | | | | |
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**INSTRUCTIONS TO SUPERVISOR**

1. Near the end of the evaluation period, return worksheet to employee for completion of Part II: Employee Worksheet for Performance Appraisal and Rating. Give employee a reasonable deadline for its return to you. Completion of the worksheet is optional on the part of the employee. (At this time, you may wish to give the employee a new Part I: Employee Worksheet for Performance Program for the next rating period, as well, a deadline for its completion. This will ensure that the employee will have the opportunity for input into the new program, as well as insure that you have adequate time to prepare the new program and give it to the employee in a timely manner.
2. Upon receipt of the employee's worksheet - Part II, (or after the deadline for its return has passed) complete Sections 1, 2, and 3, and submit to reviewer with a recommended final rating. (Include employee's worksheet, Part II, if any.) Discuss evaluation and recommended rating with reviewer.
3. When reviewer approves final rating, supervisor and reviewer complete Section 4. (Rating is final only upon reviewers’ approval.)
4. Following approval by reviewer, establish a time for the appraisal interview. At this time, discuss performance evaluation with employee.
5. Have employee sign and date acknowledgment in Section 5. Give copy of evaluation to employee, retain a copy, and send original to Personnel Office.
6. If employee wishes to attach written comments concerning the evaluation, he/she may do so. This is optional on the part of the employee.

NOTE: In completing Section 3 - Recommended Training, Development, and Performance Improvement Activities, consideration should be given, if appropriate, to such activities as in-service training, part-time study, task force assignments, PUBLIC SERVICE TRAINING PROGRAM courses, assigned readings, career counseling, and participation in professional associations.

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**SATISFACTORY**: This is a broad category which covers a wide range of employees, all of whom are performing acceptably. It is the expected and usual level

of performance. The employee generally meets performance expectations as specified in the performance program for all tasks and performs in a good and competent manner. This is the level which can minimally be expected from an employee in order for the work unit to function effectively.

The employee's performance may also be characterized as meeting minimal performance expectations for the job yet there may be areas of performance which

should be improved. The employee may meet expectations for certain tasks or assignments, but some assignments may require extra follow-up and direction by the supervisor. It is only when the employee's performance clearly shows that it is below the expected performance that a rating other than "Satisfactory" should be considered.

**NOTE: Because this rating covers a wide range of performance, supervisors may want to consider the length of time the employee has been in the**

**Job as appropriate (i.e., employees in the same job title may be performing satisfactorily but at different levels due to length of time and/or experience on the job).**

**UNSATISFACTORY**: The employee clearly does not meet performance expectations for one or more tasks, not even at a minimally acceptable level. The

employee requires significant extra direction, or the supervisor finds it necessary to avoid assigning normal tasks to the employee. The employee cannot be relied upon to carry out critical assignments in a timely or effective fashion. There is a need for immediate and significant improvement in performance.

**Appeal Rights:** Only ratings of Unsatisfactory are appealable. Disputes concerning such issues as an employee's performance program, and the rating

appeals process are not subject to appeal. Employees must file an appeal within **15 calendar days** of the receipt of an UNSATISFACTORY rating. Appeal

forms and procedural information are available from your personnel office. Employees have the right to a personal appearance and to PEF-designated

representation before the Appeals Board.