

# Indiana University Kokomo

## SUPERVISOR PERFORMANCE REVIEW AND DEVELOPMENT PLAN

Employee: \_\_\_\_\_

Time period  
under review: \_\_\_\_\_

Job title/rank: \_\_\_\_\_

Date this report  
Submitted: \_\_\_\_\_

Supervisor: \_\_\_\_\_

### DIRECTIONS

The completion of this form assumes a review of the Employee's Planning and Development Worksheet has occurred. Minor disagreements between the supervisor's list of accountabilities or priorities and that of the employee should be a topic to cover during the appraisal discussion. If there are major differences, a pre-appraisal meeting should be scheduled. The review will include:

- Satisfactory performance of assigned work duties, noting increased efficiencies, additional duties, enhanced working conditions and or other improvements.
- Successful achievement of agreed-upon key objectives during the review period.
- Evidence of appropriate utilization of broad range of managerial skills such as planning, supervision, decision-making, professional development and recognizable improvements in other requisite job aspects.
- Demonstration of a positive work attitude, enthusiasm for new concepts, interaction with students, and willingness to strive for completing assignments and meeting objectives.

The employee should be notified at least three days ahead of the appraisal session. The Employee's Planning and Development Worksheet and this form are available to the employee and supervisor. The employee should have ample opportunity to discuss other job related interests and concerns. At the end of the discussion, record the major points covered. Encourage the employee to enter comments and sign the form (page 5). His/her signature does not mean agreement, but shows that a discussion was held.

When the review is completed, the two forms (Employee's Planning and Development Worksheet and the Supervisor's Performance Review) should be sent to Human Resources. No writing except the Human Resources Director's signature will be put on the form after the employee signs it. Both forms are part of the employee's personnel file and are available to the employee upon request.

SUPERVISOR'S NARRATIVE RESPONSE TO SECTIONS I-V FROM EMPLOYEE'S WORKSHEET  
(Where appropriate improvement for effectiveness is noted)

I. Major accomplishments & annual objectives:

II. Job description duties & activities:

III. Strengths:

IV. Obstacles to performance:

V. Other:

SUPPLEMENTAL PERFORMANCE MEASURES:

JOB KNOWLEDGE, SKILLS & SELF IMPROVEMENT – Amount of job knowledge necessary to perform assigned duties and responsibilities and to accomplish stated objectives; also specialized training, experience, knowledge of current developments, and professional development.

Comments:

TEAM EFFORT & LEADERSHIP – Enthusiasm to work towards a common objective, cooperate with colleagues, respond to supervisor directions, and lead subordinates.

Comments:

ADMINISTRATION – Execution of plans, staffing, supervision, organization, fiscal accountability, handling problems, and development of new and better methods, procedures or ideas.

Comments:

VOLUME & QUALITY OF WORK – Efficient use of time, volume of work accomplished, ability to meet schedules, number of errors, dedication to service, and follow-up.

Comments:

EFFECTIVENESS IN DEALING WITH PEOPLE – Responsiveness to students, ability to provide oversight and develop subordinates, cooperation with team, ability to present ideas and get them accepted.

Comments:

INITIATIVE/DESIRE TO IMPROVE – Self-starting ability, capacity to act promptly, willingness to work beyond ordinary requirements, and to work for the collective good.

Comments:

JUDGEMENT/DECISION MAKING – Exercise of good judgment; ability to see problems objectively, and capable of making sound logical decisions under stress.

Comments:

ADAPTABILITY/ATTITUDE – Reaction to new responsibilities, handling of special projects, attitude, and flexibility.

Comments:

COMMUNICATION – Oral and written expression, precise and timely reports, proper flow of information, and ability to listen and follow directions.

Comments:

EVALUATION SCALE: individual accountabilities, key objectives, and other work characteristics (to be completed after the one-on-one review)

Circle letter denoting overall performance

O	I	M	E	P
Needs definite improvement to remain in position	Generally meets minimum job requirements, occasionally performs below minimum	Effective performance, regularly exceeding expectations	Exceptional performance, marked by significant annual accomplishments	Sustained, outstanding performance, achievements beyond annual standards

FACTORS WHICH INFLUENCED JUDGEMENT OF OVERALL PERFORMANCE MAIN POINTS DISCUSSED IN REVIEW, AND/OR AREAS FOR IMPROVEMENT (See page 5, optional).

\_\_\_\_\_  
Supervisor's Signature

Employee Comments:

\* \_\_\_\_\_  
Employee's Signature and date

\*Your signature does not necessarily imply agreement; it simply means the appraisal has been discussed with you.

Were you given an opportunity to complete an Employee Planning and Development Worksheet?

Yes \_\_\_\_\_ No \_\_\_\_\_

.....  
Human Resources Office

This person's job description should be updated. Yes \_\_\_\_\_ No \_\_\_\_\_

AREAS FOR IMPROVEMENT & ASSISTANCE

This employee would be more effective if:

Action Plan/Completion Date: