

Major Accomplishments (including progress towards goals and objectives):

Major Strengths on the Job:

Where Better Results are Needed:

Professional Development Needs:

Action Plans for Performance Improvement:

Position Description Reviewed: Yes No
(If position description changes, contact Human Resources.)

Employee

Date

Supervisor

Date

Next Level Supervisor (**PLEASE PRINT**)

Signature

Date

<u>HR USE ONLY</u>
Reviewed By: _____
Vice President/President Signature _____
Date _____