Performance and Development Plan (PDP) – Evaluation (Alternate Version)

Evaluation Information

Type of Evaluation: ◯ Interim Review ◯ Final Evaluation

Performance Period: From To

Purpose of Plan and Review: ◯ Annual ◯ Trial Service ◯ Probationary ◯ Transitional ◯ Other, Specify:

Employee Information

Last Name: First Name: Middle Initial:

Personnel Number: Position Number:

Class Title:

Working Title:

Agency/Division/Unit:

Evaluator's Name:

Part 1: Results & Competencies

Provide an assessment of the employee's performance in relation to the Key Results and Competencies expected. The assessment must be based on performance observed or verified.

Key Results

Assignment 1 Title: Status: Select One

Success Measure(s):

Assessment of Performance:

Assignment 2 Title: Status: Select One

Success Measure(s):

Assessment of Performance:

Assignment 3 Title: Status: Select One

Success Measure(s):

Assessment of Performance:

Assignment 4 Title: Status: Select One

Success Measure(s):

Assessment of Performance:

Assignment 5 Title: Status: Select One

Success Measure(s):

Assessment of Performance:

Key Competencies

Competency 1 Short Title:

Description of Progress:

Competency 2 Short Title:

Description of Progress:

Competency 3 Short Title:

Description of Progress:

Competency 4 Short Title:

Description of Progress:

Competency 5 Short Title:

Description of Progress:

Other Relevant Information (optional)

Part 2: Training & Development

Title 1: Status: Select One

Description of Key Learning Observed:

Title 2: Status: Select One

Description of Key Learning Observed:

Title 3: Status: Select One

Description of Key Learning Observed:

Part 3: Employee Comments (Optional)

The employee may use this section to comment on the evaluation, share observations, and/or evaluate how well the organization has met the expectations stated in Part 3 (Organizational Support) of the PDP Expectations form.

Part 4: Interim Reviews

Part 4 is an optional section that may be used during the course of the performance period to adjust performance expectations if circumstances change, and/or to document interim feedback sessions.

Assignment Title:

Assignment Description:

Assessment Methods (Provide description for each assessment category that applies):

Supervisor Observation:

Feedback:

Other:

Success is … (measure):

Competency Short Title:

Description of Knowledge, Skill, or Behavior:

Training/Development Title:

Key Learning Expected:

Acknowledgement of Performance Evaluation

The signatures below indicate that the supervisor and employee have discussed the contents of this evaluation.

*Please type your full name in the signature fields. **Do not** use E-sign features or insert signature image.*

This report is based on my best judgment.

Evaluator's Signature: Date:

This report has been discussed with me.

Employee's Signature: Date:

I have reviewed this report, and in my judgment, the process has been properly followed. In addition, the following comments are offered concerning the employee's performance.

Comments:

*Please type your full name in the signature fields. **Do not** use E-sign features or insert signature image.*

Reviewer's Signature: Date:

NOTE: Typically, once the performance evaluation is completed and signed by all parties, the supervisor provides the employee with a copy and the original is forwarded to Human Resources to be placed in the employee's personnel file. Supervisors should check with their Human Resources office for organization-specific instructions.