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| **Staff Member Name** | **Supervisor/Appraiser** | **Performance Period**  **(Month/Year to Month/Year):** /20 to /20 |
| **Staff Member Department** | **Staff Member paid by**  **COTC Ohio State** | **Staff Member is**  **Cost-shared OR Non Cost-shared** |

**Performance Planning & Measures**

Job Duties/Responsibilities

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| * Essential job duties/responsibilities are in the detailed position description, institutional values, and standard operating procedures and other documentation maintained by the department. * Supervisors are required to maintain, and review with each staff member, the detailed position description. Staff members are required to understand their job duties/responsibilities and to seek clarification when needed from their supervisor. If either the supervisor or the staff member question the accuracy or content of the detailed position description, both should review it together. Changes should be made by the supervisor in PeopleAdmin for COTC-paid positions or submitted to HR for Ohio State-paid positions, and, on approval by the Office of Human Resources, printed for signatures and filing in the staff member’s HR file. |
| **Optional Comments** |
| *Optional comments related to planning, two recommended (mandatory for CWA members) mid-year check-ins and/or annual appraisal.* |

Exceptional Objectives

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| * Exceptional objectives are those beyond the employee’s usual job duties or that are otherwise exceptional, e.g., due to the time commitment or departmental or institutional impact, *et cetera*. * The supervisor may deem that the position description is the sole objective and that no exceptional objectives will be listed. Or the supervisor may establish several exceptional objectives. Three to five challenging objectives generally is considered manageable and motivational. * It is the supervisor’s responsibility to maintain records documenting that objectives have been reviewed with, and understood by, the staff member and to assure that reasonable resources are provided to accomplish objectives. It is the staff member’s responsibility to understand the objectives and to seek clarification from their supervisor when needed. | | |
| **Specific** | **Important** | **Measurable** |
| *Who, what, why, where, when?* | *For example, is this tied to operational improvements?* *Institutional or departmental strategic plan?* | *How will success be measured?* |
| **Optional Comments** | | |
| *Optional comments related to planning, two recommended (mandatory for CWA members) mid-year check-ins and/or annual appraisal.* | | |

Professional Development

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| * Professional development covers a range of learning opportunities including personal development, career advancement, and skills & ability enhancement among others. * Every staff member should have at least one development objective and it may be appropriate to have several. * It is the supervisor’s responsibility to maintain records documenting that objectives have been reviewed with, and understood by, the staff member, and to assure that reasonable resources are provided to accomplish objectives. It is the staff member’s responsibility to be sure they understand the objectives and to seek clarification from their supervisor when needed. | | |
| **Specific** | **Important** | **Measurable** |
| *Who, what, why, where, when?* | *For example, is this tied to operational improvements?* *Institutional or departmental strategic plan?* | *How will success be measured?* |
| **Optional Comments** | | |
| *Optional comments related to planning, two recommended (mandatory for CWA members) mid-year check-ins and/or annual appraisal.* | | |

**Overall Performance Appraisal**

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| * Select only one. * If the rating is the high-standard “SUCCESSFUL” then comments are optional. * If the rating is “Exception: Unsatisfactory,” then comments/documentation are required:   + Specific and measurable performance improvement actions must be clearly stated within, or attached to, this form; and   + Appraisal comments and documentation must clearly justify this rating; and   + Must include dates during the appraisal period when the supervisor met with the employee to discuss deficiencies and definite steps for improvement. * If the rating is “Exception: Extraordinary,” then comments/documentation are required:   + Specific, detailed documentation supporting this rating must be attached to, or documented within, this form; and   + The documentation must clearly present the unusual challenge or opportunity; and/or   + Clearly and specifically document in what way the staff member was a key contributor to the specified objective(s) or goal(s). * In planning for the next performance year, the supervisor should be able to articulate to the employee, the differences among the various levels of achievement at the time of the goal setting session. | | |
| **SELECT ONLY ONE** | **RATING** | **DESCRIPTION** |
|  | **SUCCESSFUL** | This staff member met or exceeded expectations and contributed to the success of the department and to the institution(s) by applying their knowledge and skills in a reliable manner, adjusting to changes in workload or other needs and producing high quality results necessary to achieve objectives. This staff member is proficient in job knowledge, dependability and productivity, willingly cooperates and shares information with customers & coworkers, and recommends improvements & solutions. |
|  | Exception:  Unsatisfactory | This staff member lacked demonstrated proficiency in one or more major areas of job knowledge, dependability and/or productivity. Their performance resulted in errors, re-work, lost time and/or had a documented negative impact on the department or institution’s(s’) effectiveness or morale. This staff member failed to demonstrate consistent ability to perform the job responsibilities, complete assignments, meet commitments, organize work, and/or accomplish a fair workload. |
|  | Exception:  Extraordinary | This staff member made an extraordinary contribution to the success of the department and institution(s). In circumstances of unusual challenge or opportunity this staff member demonstrated an extraordinarily high level of expertise, achievement, commitment and responsibility, and/or was a key contributor in achieving a major departmental or institutional objective or goal. |
| COMMENTS | | |
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Signatures

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| * Staff member and supervisor signatures certify that they have met and discussed the appraisal.   + The employee’s signature does not imply agreement or disagreement with the appraisal. * The employee has the right to attach a statement to this appraisal. * Next level supervisor and cabinet member/senior-level administrator signatures certify their reviews of the completed appraisal. |
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| Staff Member Signature Printed Name Date |
| Supervisor Signature Printed Name Date |
| Next Level Supervisor Signature (If applicable) Printed Name Date |
| Cabinet/Senior-Level Administrator Signature Printed Name Date  OHR Review (Initials & Date):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |