Performance Management – Exempt Staff

<table>
<thead>
<tr>
<th>Employee’s Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>TCU ID</td>
<td>Dept</td>
</tr>
<tr>
<td>Appraisal Period</td>
<td>Supervisor</td>
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Instructions

• Review and discuss the current position description with the employee.

• Identify the appraisal period. Discuss strengths and weaknesses observed during the appraisal interview.

• The section for goal setting is provided to promote discussion during the appraisal interview. Supervisors can identify goals for the next appraisal period, indicate development needs, or specify corrective action when appropriate. Once an employee and supervisor have set goals on a performance management form, supervisors can request the employee to conduct a self-assessment of progress toward these goals prior to the next performance appraisal interview.

• Have the employee sign the form when the appraisal interview is completed. The signature indicates that all the information on the form has been discussed with the supervisor.

• Make copies of the completed form and distribute as appropriate, including one copy to employee, one copy to human resources. Retain the original in department files.
Performance Strengths and Weaknesses

Consider areas such as job knowledge, quality of performance, working relationship with supervisor, problem solving, creativity, initiative, leadership and supervisory responsibilities.

Current Goals

Identify progress made on any mutually agreed-upon goals for the appraisal period.
**Future Goals**

*Use this area to identify mutually agreed-upon goals and identify training needs for the next appraisal period.*

**Employee Comments**

*You may choose to make comments. Use the area below and the back of the form for this purpose. Signing this form means your supervisor has discussed all the information on this form with you. You do not have to agree with the appraisal summary when you sign the form.*

Employee’s Signature_________________________________________  Date__________________.

**Supervisor**

Supervisor’s Signature_________________________________________  Date__________________.

**Unit Head**

Unit Head’s Signature_________________________________________  Date__________________.