

**Performance and Staff Development Plan – Short Form
(For All Staff)**

Name of Staff Member:

Staff Member's Penn ID Number:

Date of Appraisal:

Appraisal Period:

Dept. Name:

Dept. Number:

Appraiser Name and Title:

Appraiser's Penn ID Number

Summary of Performance: (Check the One Category That Best Describes the Staff Member's Overall Performance)

Staff member's performance consistently exceeds established goals/expectations for the position and is clearly outstanding overall.

Staff member's performance consistently meets and frequently exceeds all established goals/expectations for the position.

Staff member's performance consistently meets established goals/expectations for the position.

Staff member's performance meets some, but not all, established goals/expectations for the position and improvement in specific areas is required.

Staff member's performance is unacceptable for the position and significant improvement is required.

Other comments:

Feedback on Accomplishing Goals for this Appraisal Period: (List identified goals and provide supporting feedback on staff member's performance results.)

Feedback on Demonstration of Competencies Identified as Vital to Position and/or Professional Development: (List competency and give supporting feedback on how staff member demonstrated competency and ways to enhance competency, if applicable)

Competencies to be further developed during the next appraisal cycle: (List 3 – 5 competencies to be developed and/or demonstrated during the coming cycle.)

Goals Established for Next Appraisal Cycle:

Follow-Up Activities: Performance will be reviewed again on (date).

Signatures: Secure the appropriate signatures.

*Staff Member Signature & Date _____

*My signature indicates that the Performance Letter has been reviewed with me and I have received a copy. It does not necessarily indicate my concurrence with the Performance Letter.

Supervisor Signature & Date _____

Administrative Signature & Date _____

****Sr. Business Officer Signature & Date** _____

****Signature of Senior Business Officer is required if staff member is in any level of the following job titles: Financial Coordinator, Grants Coordinator, Business Administrator, Business Manager, Grants Manager and Manager of Administration and Finance.**

Staff Member's Comments (Optional): The staff member may submit written comments on any aspect of the performance appraisal process. When completed, the comments should be given to the supervisor. The document will be forwarded to Human Resources/Staff and Labor Relations and will become a part of the staff member's official personnel file. If the staff member wishes to provide comments, s/he should check the following box. []