

Date Program Discussed

## The Research Foundation for SUNY Individual Performance <u>Program and Appraisal</u>

Copies to be kept by the employee and supervisor.

Last Name (print)	First Name (print)	Title/Grade
Period Covered  1- Objectives: Summarize the	Office/Project major objectives and/or tasks to be	PROGRAM accomplished in this position. Outline specific
	. (Attach additional sheets, if neces	
A. Outline specific objective	ves for this review period.	
	and decision making skills, work of	s performance, such as technical and human commitment, and time management, which need
<b>3- Development Plans:</b> Outlin	ne specific development plans to be	e accomplished during this performance period.
Employee Name (print)	Employee Signature	Date
Supervisor Name (print)	Supervisor Signature	Date

## **APPRAISAL**

Last Name (print)	First Name (print) Titl	le/Grade
	e performance during the appraisal period. Dispectives outlined for this appraisal period. Many if necessary)	
	ncipal strengths and areas for improvement in cal and human relations skills, problem solvint.	
Rating Date Com		
Supervisor Name (print)	Supervisor Signature	Date
Office Director/Project Director Name (print)  3- Employee's Comments:	Office Director/Project Director Signature	Date
Employee Signature	Date	_