

**STATE OF NEW YORK
Professional, Scientific &
Technical Services Unit**

Performance Evaluation Program

**Part I: Employee Worksheet for
Performance Program**

Employee's Name _____ Title _____

Rating Period: From _____ To _____
(mo./day/yr.) (mo./day/yr.)

INSTRUCTIONS: Using available materials and resources, such as job descriptions, classification standards and previous performance programs and appraisals, list the major tasks, objectives, assignments, activities, and results to be achieved during the rating period in Column 1. In Column 2, list the observable criteria for determining if each task/objective is fully performed/met. Criteria should be quantitative wherever possible. (Completion is optional on the part of employee.)

To be considered in the development of your performance program, this worksheet must be returned to your immediate supervisor (rater) no later than _____
(Supervisor fills in date.)

Column 1—Tasks/Objectives

Column 2—Performance Standards

Signature

Date

**Part II: Employee Worksheet for
Performance Appraisal & Rating**

To be considered in the preparation of your performance appraisal, this worksheet must be returned to your immediate supervisor (rater) no later than _____
(Supervisor fills in date.)

Employee Comments Concerning Performance

A. Describe accomplishments and actions completed during the rating period in terms of the tasks and objectives cited in the performance program.

B. Problems encountered, if any, during evaluation period which affected attainment of objectives or goals.

C. Development Needs (comment on areas in which you feel you need further development).

Signature

Date