FORM B

UNIVERSITY OF CAPE COAST
STAFF PERFORMANCE APPRAISAL FORM (SUPERVISOR)
JUNIOR STAFF CATEGORY

Name of Employee: ……………………………………………………………………………………… Staff No: …………

Employee’s Designation/ Rank: ………………………………………………………………………………………………

Employee’s Department: …………………………………………………………………………………………………………………

Name of Supervisor: …………………………………………………………………………………………………………………

Supervisor’s Designation/ Rank: ………………………………………………………………………………………………………

Year under Review: …………………………………………………………………………………………………………………

Purpose of Current Review

[ ] Annual Appraisal    [ ] Provisional Mid-Point    [ ] Special

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STAFF PERFORMANCE APPRAISAL FORM INSTRUCTIONS

The performance appraisal process should include the following steps:

• Obtain and review self-appraisal from employee
• Complete Staff Performance Appraisal form for employee
• Schedule meeting to discuss the appraisal
• Conduct performance appraisal meeting
• Provide copy of signed Staff Performance Appraisal to employee
• Place signed Staff Performance Appraisal in the employee’s Departmental personnel file
• Schedule meeting to discuss performance expectations with employee for upcoming year

<table>
<thead>
<tr>
<th>Unsatisfactory</th>
<th>Satisfactory</th>
<th>Successful</th>
<th>Above Expectations</th>
<th>Exceptional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee has not demonstrated improved work performance under the period of review</td>
<td>Performance standards are not fully achieved; employee fairly performs assign duties.</td>
<td>Work is fully satisfactory; employee consistently meets and occasionally may exceed performance standards. This represents the expected level of performance as established by the supervisor.</td>
<td>Work is fully satisfactory and often exceeds performance standards.</td>
<td>Work performance consistently exceeds performance standards.</td>
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### UCC Staff Appraisal Policy

#### UNIVERSITY OF CAPE COAST

#### STAFF PERFORMANCE APPRAISAL FORM

<table>
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<th>U</th>
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<th>A</th>
<th>E</th>
<th>Examples that Support Rating</th>
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#### Job Knowledge/Functional and Technical Skills:
- Has achieved required level of knowledge and skills in position-related areas
- Applies knowledge and skills to meet job requirements
- Keeps up to date in all relevant knowledge and skills areas to meet job requirements

#### Interpersonal Communication:
- Relates well to all people – up, down, and across – internally and externally to the School/Department
- Establishes rapport; builds and maintains effective working relationships
- Practices attentive and active listening
- Uses diplomacy and tact; can diffuse high-tension situations comfortably

#### Initiating Action:
- Readily takes action consistent with department objectives
- Looks for and takes advantage of opportunities to act beyond what is required
- Takes independent actions when appropriate
- Volunteers readily
- Suggests methods and procedures to improve departmental operation

#### Quality of Work:
- Accurately and carefully follows process/procedures for completing work
- Ensures a high-quality output of work (resulting in minimal acceptable/zero errors)
- Attentive to all details and aspects of a job or process to ensure a complete, high quality output

#### Work Habits:
- Conducts work within the established (and accepted) department practices
- Conducts work according to the established and approved work schedule
- Demonstrates professionalism and workplace etiquette

#### Composure:
- Maintains effective performance under pressure
- Copes effectively and develops effective approaches to deal with pressure or stress
- Presents a positive disposition and maintains constructive interpersonal relationships when under stress

#### Mentoring Others (Where Applicable)
Summary of Current Year Objectives:

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Identify Development Needs (Specified areas):

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Supervisor’s Overall Summary: ................................................................................................................................
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Supervisor’s Overall Rating (tick)
[ ] Unsatisfactory [ ] Satisfactory [ ] Successful [ ] Above Expectations [ ] Exceptional

Employee Comments (Optional): ................................................................................................................................
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__________________________  ____________________________  ____________________________  ____________________________
Employee Signature/Date  Supervisor Signature/Date

__________________________  ____________________________
Name  Name