

PERFORMANCE EVALUATION

NON-UNIT (ALL LEVELS)

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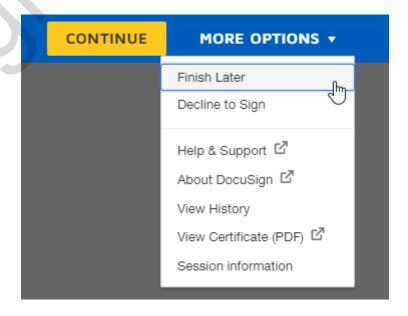
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PERFORMANCE EVALUATION

NON-UNIT MANAGER

PART I: GENERAL INFORMATION	
Name:	
State Title:	
Campus Title:	
Department:	
Annual Evaluation Period: July 1, <u>20</u> to June 30, <u>20</u>	

PART II: EVALUATION OF SPECIFIC AREAS

Workflow Process

- 1) Employee completes self-evaluation in the EMPLOYEE SECTIONS for each area of evaluation.
- 2) Employee signs verifying self-evaluation is complete and submits to Supervisor for response.
- 3) Supervisor completes the SUPERVISOR SECTIONS for each area of evaluation.
- 4) **Supervisor signs** verifying their response is complete and **submits** to **employee** for review and/or additional comments. A meeting with the employee is *recommended* before next step to allow for discussion.
- 5) Employee may record additional comments (optional) and signs verifying receipt of completed evaluation.
- 6) The form routes to HR for inclusion in personnel file and a copy routes to Divisional VP.

Rating Scale

- **Significantly Exceeds Expectations** work is performed in a distinguished superior manner achieving all goals at a level significantly above expectations; very few employees will achieve this rating.
- **Exceeds Expectations** work is performed with a high degree of competence and all goals are achieved at a level typically above standard.
- **Meets Expectations** work is performed in an acceptable manner achieving goals at a level that meets the standard.
- **Does Not Meet Expectations** work is performed below the standard requirement; has trouble meeting some goals; room exists for improvement.
- Unsatisfactory significantly deficient in skills and abilities.

Areas of Evaluation

- Management
- Leadership/Supervision
- Strategic Planning and Assessment
- Financial/Budget Management
- Work Ethic
- Communications/Interpersonal Skills
- Community Relations/Services

Evaluation Schedule	
Employee self-eval period ends	June 30
Employee self eval due to supervisor	July 15
Supv completes eval and reviews w/employee	August 15
Employee acknowledges receipt & routes to HR	August 31
+ divisional VP	

Contact HR@westfield.ma.edu for assistance.

This form available at https://www.westfield.ma.edu/offices/hrtitleix-eo/forms-and-resources

Management – Effectively oversees departmental programs and projects; plans and organizes work; delegates, coordinates and effectively uses time; counsels, develops, evaluates, and advances subordinates effectively; demonstrates and applies professional skills and knowledge in field of responsibility.
EMPLOYEE SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
SUPERVISOR SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
Leadership/Supervision – Provides effective leadership and supervision for department/area; exercises sound judgement; demonstrates ability to motivate and manage others; sets appropriate expectations for employees; hold employees accountable; provides dynamic and creative leadership.
EMPLOYEE SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
CLIDEDVICOR SECTION
SUPERVISOR SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:

Strategic Planning and Assessment – Sets appropriate goals and objectives for area; offers valuable participation in university planning and assessment; employs assessment tools to effectively evaluate and improve programs; seeks to implement mission of the University in annual planning.
EMPLOYEE SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
SUPERVISOR SECTION Rating: □ Significantly Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
Financial/Budget Management – Demonstrates fiscal responsibility and efficient utilization of resources; uses responsible, cost-effective purchasing practices; complies with University financial policies and procedures.
EMPLOYEE SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:
SUPERVISOR SECTION Rating: □ Significantly Exceeds □ Exceeds □ Meets □ Does Not Meet □ Unsatisfactory Response:

expectations. **EMPLOYEE SECTION** ☐ Significantly Exceeds ☐ Exceeds ☐ Meets ☐ Does Not Meet ☐ Unsatisfactory Rating: Response: SUPERVISOR SECTION ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory Rating: Response: Communications/Interpersonal Skills – Effectively communicates with others in writing and speaking; listens carefully, represents the University well in internal and external communications; gains respect of academic, internal, and external community; fosters environment of respect and civility. **EMPLOYEE SECTION** ☐ Significantly Exceeds ☐ Exceeds ☐ Meets ☐ Does Not Meet ☐ Unsatisfactory Rating: Response: SUPERVISOR SECTION ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory Rating: Response:

Work Ethic - Demonstrates high ethical standards; sets positive example for subordinates; seeks opportunities for

creativity and new achievements in work area; takes pride in work; demonstrates willingness to go beyond

Community Relations/Services – Volunteers and participates in University governance and/or professional organizations; participates in campus and community activities; represents the University well in various external forums.
EMPLOYEE SECTION
Rating: ☐ Significantly Exceeds ☐ Exceeds ☐ Meets ☐ Does Not Meet ☐ Unsatisfactory Response:
SUPERVISOR SECTION
Rating: ☐ Significantly Exceeds ☐ Exceeds ☐ Meets ☐ Does Not Meet ☐ Unsatisfactory Response:

university community made within this evaluation period.
EMPLOYEE RESPONSE:
SUPERVISOR RESPONSE:
Goals: Identify goals for the upcoming evaluation period.
EMPLOYEE RESPONSE:
SUPERVISOR RESPONSE:

PART III: ACCOMPLISHMENTS AND GOALS

Employee Comments (optional): Supervisor Comments (optional): **Signatures** Employee Self-Eval Completed By: Date:_____ Date:_____ Supervisor Eval Completed: Employee Receipt of Supervisor Eval:_ Date: (Does not imply agreement with the evaluation) Received by Human Resources: Date:_____

PART IV: ADDITIONAL COMMENTS AND SIGNATURES