Employee Excellence Program (EEP) Performance Evaluation Form Southern Illinois University Edwardsville

SECTION I - Employme	iil Dala		
Employee Name:		Banner ID #:	
Classification:	Choose an item.	Position Title / Number:	
Department:		_	
Period Covered From	: To:		Choose an item.

INTRODUCTION

The Employee Excellence Program (EEP) is an ongoing process designed to clarify employee job roles and expectations, to enhance supervisors/employee communication, to foster employee job effectiveness, to encourage employee development, and to provide a basis for human resource decisions. The purpose of this form is to provide a framework for the EEP process and to create a record of EEP discussions. A thorough presentation of the program is provided in the EEP Supervisor's Guide, which is available on the Office of Human Resources webpage. Please review the guide and this form in their entirety before you begin the EEP process. After completing the form, including all signatures indicated, make copy for employee, and return original to Office of Human Resources, Box 1040. See the EEP Supervisor's Guide for a description of required follow-up activity in cases of *Does Not Meet Standards of Performance that warrants a development of a Performance Improvement Plan (PIP). Supervisors are responsible for implementing the EEP process, including the timely completion of performance reviews.

(11). Supervisors are responsible for implementing the EET process, medium give timely completion of performance reviews.							
SECTION II – General Performance Factors (Complete for All Employees including Managers and Supervisors) Rating Elements Check One Rating							1
Rating Elements				eck One Kat	ing		-
		Not Applicable	*Does Not Meet Standards of Performance	*Meets Standards With Recommended Improvement (s)	Meets Standards of Performance	*Exceeds Standards of Performance	*Comments are required for those ratings marked with an asterisk.
	Knowledge		1			1	Comments:
A.	Possesses knowledge & skills necessary to perform job			\boxtimes			
B.	Keeps current with changes in the job						
C.	Understands job requirements and department functions						
Qua	lity of Work						Comments:
A.	Is accurate and thorough						
B.	Makes consistent effort to listen, understand, and satisfy client/user needs						
C.	Follows policies, procedures, regulations, and protocol						
D.	Uses equipment properly; avoids creating safety hazards						
	ductivity		1	1		1	Comments:
A.	Completes appropriate amount of work						
В.	Manages time effectively						
C.	Balances multiple job responsibilities						
D.	Organizes work effectively						
Com	munication, Interpersonal Relationships, Teamwork		1	1		ı	Comments:
A.	Shows tact, sensitivity, and diplomacy in dealing with others						
B.	Keeps appropriate people informed in a timely manner						
C.	Listens to other's view and encourages other to express their views						
D.	Sustains positive work relationships with others and resolves conflict with others directly, constructively						
E.	Responds positively to constructive suggestions						
F.	Contributes effectively to team assignments						
Dep	endability – Attendance						Comments:
A.	Completes work on time						
B.	Works independently; requires minimal supervision						
C.	Reports to work on time and utilizes breaks appropriately						
D.	Has infrequent unscheduled absences						
Initi	ative – Problem Solving						Comments:
A.	Recognizes need for action and reacts appropriately/self-starter						
B.	Takes on additional responsibility when and where needed						
C.	Adapts well to change (e.g., schedules, procedures, priorities)						
D.	Makes consistent efforts to listen to, understand, and satisfy client/user						
E.	Identifies potential problems, analyzes, formulates solutions						
Res	oonsibilities not listed above						Comments:
A.							
B.							
C.							
D.							
E.							

SECTION III – Complete for Managers and Supervisors Performance Evaluation Only							
Rating Elements			Check One Rating				
		Not Applicable	*Does Not Meet Standards of Performance	*Meets Standards With Recommended Improvement (s)	Meets Standards of Performance	*Exceeds Standards of Performance	*Comments are required for those ratings marked with an asterisk.
Plan	ning – Resource Management		1	,			Comments:
A.	Sets goals and plans for future development						
В.	Manages monetary resources effectively						
C.	Introduces appropriate technology into work environment						
	ng – Affirmative Action						Comments:
A.	Recruits and hires quality personnel						
B.	Uses hiring and promotional opportunities to improve workplace diversity and meet affirmative action objectives						
Hun	nan Resource Management		1	1			Comments:
A.	Plans and organizes workload and staffing, using staff time, skills and potential						
B.	Achieves constructive working relationship between staff and management						
C.	Manages change and achieves staff support of objectives						
D.	Shows fairness in dealing with staff						
Emp	oloyee Development						Comments:
A.	Evaluates performance regularly, accurately, and fairly						
B.	Coaches and reinforces performance to facilitate employee achievement						
C.	Assists and supports appropriate employee development opportunities						
D.	Prepares employees to assume increased responsibilities						
Ε.	Acts quickly and appropriately on performance problems						
	icipative Management						Comments:
Α.	Shares decision-making responsibility appropriately						
В.	Provides employees with feedback and recognition						
C.	Holds regular employee meetings; keeps staff informed						
D.	Seeks and listens to employee input/feedback						
E.	Encourages teamwork and group achievement						
A.	ponsibilities not listed above				П		Comments:
В.							
С.							
D.							
E.							
Also can Emp	primary duties, performance areas, development plans, and evaluation have be, the content of this form, the supervisor's role in planning the appraisal, his/he be included as employee's comments (employee is to use continuation sheet as bloyee's Signature: ployee's Printed Name:	er developr	nent progre		gestions fo		
Sup	ervisor's Printed Name/Title: artment Administrator Signature:				<u> </u>	Date:	

After completing the form, including all signatures indicated, make copy for employee, and return original to Office of Human Resources, Box 1040.

Department Administrator Printed Name: