

# Employee Performance Review Form — Appendix 324A

**Name of Employee:** \_\_\_\_\_

**Position/Classification:** \_\_\_\_\_

**Department/Office/Parish:** \_\_\_\_\_

**Date of Review:** \_\_\_\_\_

**Name of Immediate Supervisor/Evaluator:** \_\_\_\_\_

**Identify period of evaluation:** from \_\_\_\_\_ to \_\_\_\_\_

If any changes, provide updated position description and identify major changes below:

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## Goals/Objectives for Next Review Period

(Includes areas, expectations, opportunities for growth/improvement of performance and/or duties, identification of any training/education needs specifically associated with responsibilities/duties of the position and/or with personal and/or professional development; and anticipated projects or other special work assignments)

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## Accomplishments/Contributions during Review Period

(Includes courses, workshops, projects, personal development; previously identified special work assignments and/or goals that were successfully achieved)

Supervisor Comments: \_\_\_\_\_  
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Employee Comments: \_\_\_\_\_  
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Next date for Employee's Performance Review: \_\_\_\_\_

\_\_\_\_\_  
Name of Supervisor / Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Employee / Signature

\_\_\_\_\_  
Date