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| **University of Texas Health Science Center at Houston**  UT logo |
| **Hourly Employee Performance Appraisal Form** |

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| **Employee Name** | Click here to enter text. | **Evaluation Period** | Enter fiscal year. |
| **Employee ID** | Click here to enter text. | **Department** | Click here to enter text. |
| **Job Title** | Click here to enter text. | **Business Unit**  **(School, Hospital, Center, etc.)** | Click here to enter text. |
| **Supervisor Name** | Click here to enter text. |  |  |

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| **General Guidelines & Instructions** |
| 1. Manager enters their assessment of employee’s performance in the form.    * Section I - rates each performance standard and adds comments as appropriate.    * Section II (Optional) – rates and enters comments for each performance goal.    * Section III – rates the employee’s overall performance. Enter comments/assessment of their overall performance. 2. Manager sends the performance appraisal with their assessment electronically to the employee. 3. Manager schedules performance discussion. 4. The employee reviews the manager’s assessment, enters comments if desired and prepares for the performance discussion. 5. Manager and employee discuss and review the performance appraisal and the optional performance goals for the next fiscal year if applicable. Make updates as required and finalize the performance appraisal. 6. Manager prints final appraisal and provides to employee to sign. 7. Employee and manager sign the printed appraisal and manager files the signed appraisal in the employee’s personnel file |

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| **Performance Rating Definitions** | |
| **Exceeds Expectations** | Performance consistently exceeded expectations in all essential areas of responsibility, and the quality of work overall was excellent. Goals were met. |
| **Fully Meets Expectations** | Performance consistently met expectations in all essential areas of responsibility, at times may exceed expectations, and the quality of work overall was consistently met. The most critical goals were met. |
| **Improvement Needed** | Performance did not consistently meet expectations – performance failed to meet expectations in one or more essential areas of responsibility, and/or one or more of the most critical goals were not met. |
| **Unsatisfactory** | Performance was consistently below expectations in most areas of responsibility, and/or reasonable progress toward critical goals was not made. Significant improvement is needed in one or more areas. |

| **Section I – Performance Standards** | | | |
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| **Instructions** | Rate the employee on each of the performance standards below. Click in the Rating field and choose the rating from the drop-down box. | | |
| **Performance Standard** | | **Comments** | **Rating**  Click to select Rating |
| **Exemplifies Strong Ethics, Integrity and Respect for Others**  Deals with others in a straightforward and honest manner, is accountable for actions, maintains confidentiality, and supports institutional values. Complies with the ethics and standards of their professional license. Promotes a culture of inclusion built on trust, respect and dignity for all | |  | **Please Select Rating** |
| **Delivers Quality Student, Patient and Customer Services**  Is committed to excellence. Focused on understanding the needs and delivering the highest quality of services for our students, patients and customers. Continuously looks for opportunities for improvement. Addresses problems, questions and concerns in a timely manner. Acts in a compassionate, respectful, and professional manner. | |  | **Please Select Rating** |
| **Exhibits Teamwork and Collaboration**  Works effectively and cooperatively with others, is flexible and open-minded, and establishes and maintains good working relationships. Acknowledges and recognizes the contributions and accomplishments of others. Seeks opportunities to support the team. | |  | **Please Select Rating** |
| **Demonstrates Personal Effectiveness and Accountability**  Meets commitments, works independently, accepts accountability, handles change, sets personal standards, stays focused under pressure, meets attendance/punctuality requirements. Communicates well both verbally and in writing. Shares information and ideas with others. Demonstrates active listening skills and interpersonal savvy. Seeks and is receptive to feedback. Maintains current skills and proactively develops new knowledge and capabilities. | |  | **Please Select Rating** |
| **Adheres to All Work Environment, Health, Safety and Compliance Standards**  Adheres to all health and safety rules and requirements, departmental policies, and compliance/HOOP standards and policies. Completes all institutional mandatory, health, safety and compliance training required by job function, according to deadlines. | |  | **Please Select Rating** |
| **Exhibits Required Job Knowledge**  Performs job in a manner that demonstrates necessary job knowledge, skills, and capabilities required for the position. | |  | **Please Select Rating** |

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| **Section II – Performance Goals & Objectives (Optional)** | | | |
| **Instructions** | List the employee’s performance goals for the period being evaluated. Enter key accomplishments in the Results & Comments field. Select the appropriate level of attainment in the rating field by clicking and selecting the rating from the drop-down box. | | |
| **Performance Goals** | | **Results & Comments** | **Rating**  Click to select Rating |
|  | |  | **Please Select Rating** |
|  | |  | **Please Select Rating** |
|  | |  | **Please Select Rating** |

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| **Section III – Summary of Overall Performance** | | | | | | |
| **Instructions**  To be completed by employee’s manager. Click the appropriate check box below to indicate the employee’s overall rating for the performance period. | | | | | | |
| **Overall Rating** | | | | | | |
| **Exceeds Expectations** | **Fully Meets Expectations** | | **Improvement Needed** | | **Unsatisfactory** | |
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| **Summary of Overall Performance** | | | | | | |
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| **Section IV - Signatures** | | | | | | |
| We certify by our signatures below that this performance evaluation has been discussed and finalized. | | | | | | |
| **Employee** | |  | | **Date** | | Click here to enter a date. |
| **Manager/Supervisor** | |  | | **Date** | | Click here to enter a date. |
| **Senior Manager/Supervisor** | |  | | **Date** | | Click here to enter a date. |