



MISSISSIPPI STATE UNIVERSITY

PERFORMANCE APPRAISAL Mississippi State University Staff

Employee Name:
MSU ID Number:
Job Title:
Department:
Appraisal Date:

Appraisal Period

From
To

Type Appraisal

Annual
Promotion/Transfer
Termination of Employment
Other

Ratings: 5 = Outstanding, 4 = Exceeds Most Expectations, 3 = Meets and Exceeds Some Expectations, 2 = Needs Improvement, 1 = Unacceptable

ANNUAL PERFORMANCE GOALS AND RESULTS

This section is used to list annual performance goals and record the results that will be used in the overall performance rating. The goals listed should be those set at the beginning of the prior year's appraisal cycle.

Goals and Results

Large empty box for listing performance goals and results.

Overall Goals and Results Rating

Rating input box

COMPETENCIES

Refer to Instructions for definitions of competencies.
Provide specific, actionable feedback in Comments section.

Customer Focus

Comments ▼

Customer Focus Rating ►

Accountability

Comments ▼

Accountability Rating ►

Adaptability

Comments ▼

Adaptability Rating ►

Occupational Knowledge

Comments ▼

Empty text area for Occupational Knowledge comments.

Occupational Knowledge Rating ►

Rating input field for Occupational Knowledge.

Communication

Comments ▼

Empty text area for Communication comments.

Communication Rating ►

Rating input field for Communication.

Teamwork

Comments ▼

Empty text area for Teamwork comments.

Teamwork Rating ►

Rating input field for Teamwork.



Inclusiveness

Comments ▼

Empty text area for comments related to Inclusiveness.

Inclusiveness Rating ►

Rating input field for Inclusiveness.

Initiative

Comments ▼

Empty text area for comments related to Initiative.

Initiative Rating ►

Rating input field for Initiative.

Work Quality

Comments ▼

Empty text area for comments related to Work Quality.

Work Quality Rating ►

Rating input field for Work Quality.



Leadership

Comments ▼

Leadership Rating (enter 0.00 if not rating this competency) ▶

Overall Competencies Rating ▶

Performance Summary

Employee Name: _____
MSU Identification Number: _____

Weighted Annual Goals and Results Rating ►

Weighted Competencies Rating ►

OVERALL RATING ►

- 5 Outstanding
- 4 Exceeds Most Expectations
- 3 Meets and Exceeds Some Expectations
- 2 Needs Improvement
- 1 Unacceptable

All signatures are required for processing.

Supervisor Signature _____
Date _____

Department/Unit Head Signature _____
Date _____

Employee Signature _____
Date _____

Employee signature does not indicate agreement with the appraisal. It only acknowledges that the employee was given the opportunity to discuss the appraisal with the supervisor.