

PERFORMANCE QUESTIONNAIRE
CENTER FOR ENVIRONMENTAL MANAGEMENT OF MILITARY LANDS
COLORADO STATE UNIVERSITY

NAME: _____

WORK LOCATION: _____

APPRAISAL PERIOD: _____

Please discuss the employee's professional competence (knowledge, quality and quantity of work, timeliness):

Please discuss the employee's abilities to analyze problems and make decisions (identify problems, obtain facts, seek input, consider options):

Please discuss the employee's abilities to plan, organize, and coordinate work assignments (develop plans, set priorities and deadlines, coordinate with others):

Please discuss the employee's organizational commitment and adaptability (knowledge of established policies; portrayal of a positive and professional image; willingness to put forth extra effort when needed, to observe scheduled work hours, and to modify plans as needed):

Please discuss the employee's communication skills (considers others' ideas, prepares clear and complete written documents, orally communicates courteously and effectively, keeps others informed):

Please discuss the employee's interpersonal relations (supportive and respectful of others, uses tact and diplomacy, sensitive to efforts and feelings of others, gains cooperation of others, is accessible and responsive to others):

Please discuss the employee's quality management abilities (considers internal processes and recommends improvements, suggests changes to be more responsive to needs of clientele, uses funds efficiently and conservatively, uses equipment safely and conservatively):

IF APPROPRIATE, please discuss the employee's supervision skills (employees under supervision are competent and productive, utilizes employees' skills, communicates goals and objectives to employees, resolves routine personnel issues, adheres to affirmative action principles and policies):

IF APPROPRIATE, please discuss the employee's program management abilities (quality and quantity of service, meets schedules and deadlines, develops methods and procedures to complete work, conducts adequate inspections for quality control):

Please list employee's strengths:

Please list employee's weaknesses:

Please list or describe below goals to be achieved during the next appraisal period:

Please list or describe below professional growth plans for the next appraisal period:

Printed Name

Supervisor or POC Signature

Date