

SUNYANI TECHNICAL UNIVERSITY



STRICTLY CONFIDENTIAL

FORM F

STAFF PERFORMANCE APPRAISAL FORM
(TEACHING & NON-TEACHING)

For the periodJanuary.....To.....December, 2017
.....

1. PERSONAL INFORMATION:

Surname (Miss/ Mrs. / Mr. / Dr):.....

(USE BLOCK LETTERS)

Other Names:.....

Department:.....Staff No.....

Date of First Appointment:.....

Present Grade:.....

Salary Scale:.....

Present Salary:.....

Status: (Temporary/ Established).....

TO BE COMPLETED BY HEAD OF SECTION/UNIT OR DEPARTMENT

2 REVIEW PERFORMANCE

(a) How well has appraisee met the main tasks and objective of job during the year under assessment?

.....
.....
.....

(b) KNOWLEDGE OF JOB(Please tick ratings where appropriate)

- i. Knows only routine work ()
- ii. knows more than just routine, repetitive work ()
- iii. Has good knowledge of nearly all aspect of work ()
- iv. Has sound knowledge of all aspect of work ()

(c) QUALITY OF WORK

- i. Soddy work – constant, constant checking or correction required
- ii. Occasionally careless
- i. Usually accurate, hardly any checking or correction required

(d) SPEED OF WORK

- i. Very slow – always fail to meet deadline
- ii. Responds promptly to instructions and requests
- iii. Slow often unable to meet deadline or respond to instructions and request
- iv. Average speed
- v. Above average speed
- vi. Very fast

(e) CO –OPERATIVE

- i. Generally difficult to work with
- ii. Occasionally co –operative
- iii. Usually co –operative

(f) INITIATIVE

- i. Always waits to be told what to do
- ii. Often waits to be told what to do
- iii. Always a self – starter

(g) LEADERSHIP(Where applicable)

- i. Unable to stimulate team – work
- ii Generally able to stimulate subordinates to perform effectively
- iii Unable to control subordinate staff effectively and efficiently

(h) ATTENDANCE AND PUNCTUALITY

- i. Usually punctual and regular at work
- ii. Usually punctual but not regular
- iii. Usually regular but not punctual

3. TRAINING AND DEVELOPMENT

- a. What competencies does the employee lack?.....
.....
.....
- b. What specific training should be given to enable him acquire the competencies
.....
.....
.....

4. SETTING OBJECTIVES

Please agree with the appraisee on key job objectives for the next period of evaluation:

.....
.....

.....

5. OVERALL ASSESSMENT

(To be completed by Head of Section/Unit/Department)

	Outstanding	Very good	Good	Average	Below Average	Unsatisfactory
Work						
Conduct						

6. OTHER COMMENTS, (IF ANY)

.....

.....

.....

Is the appraisee recommended for increment now due?.....

If no, why?.....

.....

.....

.....

NAME OF SECTION/UNIT/ DEPARTMENT HEAD (Appraiser)

.....

Signature.....Date.....

COMMENTS BY APPRAISEE

I certify that I have seen the contents of the report and that my head has discussed them with me. I have the following comments to make:

.....
.....
.....

COMMENTS BY DEAN OF SCHOOL OF

.....
.....

Name..... Sign.....

Date.....