

PERFORMANCE PROGRAM
UUP Professional Employees

Employee's Name:				
Department:				
Performance Program Period:	From Date:		To Date:	
Campus Title:				
Budget Title:			Grade Level:	SL-
Initial Appointment Date:		Appointment Date to Current Title		
Immediate Supervisor & Title:				

Instructions

Prepare a draft of the performance program and discuss with the employee before completing in final form. Discussion should include appropriate criteria for evaluating the degree to which duties are performed and objectives are met.

The Memoranda of Understanding suggests the following criteria:

- A. **Effectiveness in Performance** – i.e. success in carrying out assigned duties and responsibilities, efficiency, productivity and relationship with colleagues.
- B. **Mastery of Specialization** - i.e., degrees, licenses, honors, awards, and reputation in professional field.
- C. **Professional Ability** - i.e., invention or innovation in professional, scientific, administrative, or technical areas; i.e., development or refinement of programs, methods, procedures, or apparatus.
- D. **Effectiveness in University Service** - i.e., successful committee work, participation in local campus and University governance, and involvement in campus-related student or community activities.
- E. **Continuing Growth** - i.e., continuing education, participation in professional organizations, enrollment in training programs, research, improved job performance and increased duties and responsibilities.

Use additional sheets as necessary.

A revised **PERFORMANCE PROGRAM** must be discussed and prepared within one month whenever a substantive change occurs. Minor revisions may be made by forwarding a memo stating the revision and including signatures of the employee and supervisor, to the Office of Human Resources, with a copy to the second-line supervisor.

If the performance program has changed substantially in scope or complexity during the past year, or over a period of years, a case might be made for promotion/reclassification, or salary increase within rank. For further information contact the Office of Human Resources.

Originating office must distribute, in confidential envelopes, as follows:

Original Signed Copy - Office of Human Resources;

Copies - Employee, Supervisor, Second-line Supervisor.

1. Duties and Responsibilities
2. Supervisor Relationships: Who supervises this employee? Who does this employee supervise?
3. Functional Relationships: Primary offices with which this person works.
4. a) Short Term Objectives:
4. b) Long Term Objectives:
5. SECONDARY SOURCES TO BE CONSULTED: Agencies, offices, or individuals that will be involved with the performance of the employee and may affect the employee's ability to achieve the stated objectives.

SUPERVISOR'S SIGNATURE

DATE

EMPLOYEE'S SIGNATURE

DATE

DISTRIBUTION:

Originating office must distribute, in confidential envelopes, as follows:

Original Signed Copy Office of Human Resources

Copies Employee
 Supervisor
 Second-line Supervisor