



**Employee Performance Evaluation Form**

Employee Name:

Employee Title:

Department/Program:

Supervisor:

Department/Program Director:

Type of Evaluation: 30-Day

60-Day

90-Day

Annual

Today's Date:

**Rating Key:** Rate the performance for each key job element identified in the employee's job description using the following key.

**1- Outstanding** (*performance far exceeds overall standards & expectations for this position*)

**2- Highly Effective** (*performance exceeds overall standards & expectations for this position*)

**3-Good Competent** (*performance meets the set standards for this position*)

**4- Needs Slight Improvement** (*performance needs small improvement for this position*)

**5- Poor** (*performance is below expectations, & struggles for improvement*)

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**Scope of the Position:**

**Duties & Responsibilities**

**Rating**

**Comment**

(How did employee earn rating?)

1.

2.

3.

4.

5.

**Duties & Responsibilities**

**Rating**

**Comment**  
(How did employee earn rating?)

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

16.

17.

18.

19.

**Position Requirements**

**Rating**

**Comment**  
(How did employee earn rating?)

1.

2.

3.

4.

5.

6.

7.

**Supplemental Job Elements**

**Rating**

**Comment**  
(How did employee earn rating?)

(Summarize the employee's performance for each supplemental job element)

1. Employee's ability to organize and plan
2. Employee's ability to communicate information.
3. Employee's ability to work with others.
4. Employee's ability to develop & lead subordinates.

**Overall Summary of Employees Job Performance**

**Changes to Job Description are recommended:** Yes \_\_\_\_\_ Not at This Time \_\_\_\_\_

If "Yes" Please list date of last Job Reclassification/Update: \_\_\_\_\_

What changes are recommended and why? *(Please list below)*

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Last Year's Performance Objectives:

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Current Objectives: (Today's Date: \_\_\_\_\_ )

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Employee Comments: \_\_\_\_\_

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I have read and had the opportunity during this evaluation to ask questions and voice my concerns regarding Standing Rock Sioux Tribes Policies & Procedures (P&P) Manual. My supervisor had communicated and reviewed the entire Performance Evaluation. I understand the given rating and was afforded the opportunity to provide input.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

I have reviewed my employees performance for the year of \_\_\_\_\_, and communicated to my employee the reasoning for the given rating and provided him/her the opportunity to give input.

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

I have reviewed and concur with the current evaluation.

\_\_\_\_\_  
Program/Department Director

\_\_\_\_\_  
Date

**Recommendations:**

\_\_\_\_\_ **Add to Personnel File** (*No action at this time*)

\_\_\_\_\_ **Hire for permanent employment** (Human Resource mailed letter: \_\_\_\_\_)

\_\_\_\_\_ **Recommend a Performance Improvement Plan** as outlined in SRST Policy & Procedure.

\_\_\_\_\_ **Extend Probation Status** by an additional \_\_\_\_\_ days. (For 90 day evaluation)

\_\_\_\_\_ **Not recommended for hire**

\_\_\_\_\_ **Recommend for Merit Increase**

**Based on:** Outstanding Performance as listed above with Comment  
Employee has had Zero Disciplinary action in the past year.  
Employee has not been on Performance Improvement Plan last year.  
Employment has been for longer than a year in current position.  
Zero Financial Constraint on FY year budget.  
This is in accordance with scheduled annual evaluation cycle.  
Average Score must be below 3.00 in ratings of Duties & responsibilities, and Position Requirements. (*HR will total and provide Average Score to Director*)

The above “recommended” merit increase is approved and the fiscal year budget allows for movement along the salary range.

**Initial Below:**

\_\_\_\_\_  
**Human Resource Manager**  
*HR Office*

\_\_\_\_\_  
**CFO**  
*Finance Dept.*

\_\_\_\_\_  
**Executive Director**  
*Administration*

Office Use Only

Received By:

DATE RETURNED TO HR