**Administrative Employee**

**Objective Setting & Performance Review Form**

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| **Name:** |  |
| **School/Dept.:** |  |
| **Performance Year:** |  |

**Part 1 – Objective Setting**

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| **Managerial and Leadership Objectives should reflect behaviours set out in the document “Leadership Behaviour Competencies” available on the HR website under the Performance Management link. Milestones may be added to objectives if desired.** |
| **Leadership Objective (at least one objective for every administrator)**  **Objective #**  **Check-in (at each 2-month period) 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
| **Managerial Objective (at least one objective required for any administrators with direct-reports)**  **Objective #**  **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
| **Most Operational Objectives should relate to the priorities set out in the College’s Strategic Plan and link to the business objectives of the administrator’s school/department.  (typically 3 - 5 operational objectives are set) Milestones may be added to objectives if desired.** |
| **Objective #\_\_ (relates to strategic priority # \_\_ (if applicable))**  **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
|  |
| **Objective #\_\_ (relates to strategic priority # \_\_(if applicable))** |
| **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
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| **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
| **Objective #\_\_ (relates to strategic priority # \_\_(if applicable))** |
| **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |
| **Core Duties (identify highlights, areas for improvement)** |
| **Check-in 1\_\_ 2\_\_ 3\_\_ Final Review \_\_ Results** |

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| **Name:** |  |
| **School/Dept.:** |  |
| **Performance Year:** |  |

**Part 2 – Performance Review**

**Initially, employee and manager will apply their ratings and the form will be submitted to HR for review. Once returned, manager will conduct performance review with employee, final ratings will be applied and signed form will be returned to HR for any applicable compensation adjustments and for filing.**

**Ratings: Exceptional, Above Expectations, Fully Successful, Partially Successful, Unsatisfactory**

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|  | **Employee Self-Rating** | **Manager’s Rating & Comments** |
| **Leadership Objective Objective #** |  |  |
| **Managerial Objective Objective #** |  |  |
| **Objective #** |  |  |
| **Objective #** |  |  |
| **Objective #** |  |  |
| **Objective #** |  |  |
| **Objective #** |  |  |
| **Objective #** |  |  |
| **Overall Performance Rating** |  |  |

*If overall performance rating is Partially Successful or Unsatisfactory a* ***performance*** *development plan should be developed by the manager and employee and MUST be attached.*

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| **Performance Reviews for all administrative or support staff direct reports have been completed for this performance year**  **\_\_\_Yes \_\_\_No** |
| **JFS (Job Fact Sheet) has been reviewed \_\_\_ If updates are required, please work with your HR Consultant to prepare for review by Classification Committee** |
| **Professional Development Plan \_\_\_ Developed and Attached** |

**Employee Comments:**

**Manager Comments:**

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| **Employee Signature** | **Manager Signature** |
| **Date:** | **Date:** |
| **ELT Signature** | **President Approval (if applicable)** |
| **Date:** | **Date:** |