

FORM PREVIEW

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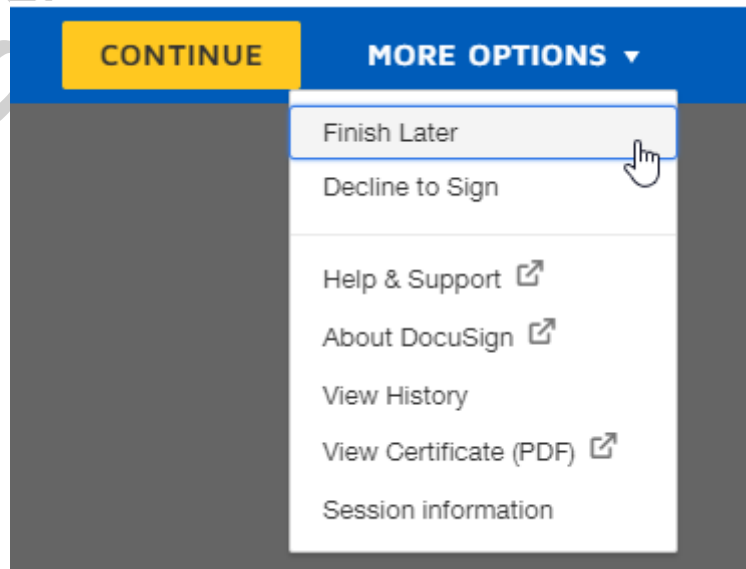
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PART I: GENERAL INFORMATION

Name: _____

State Title: _____

Campus Title: _____

Department: _____

Annual Evaluation Period: July 1, 20 to June 30, 20

PART II: EVALUATION OF SPECIFIC AREAS

Workflow Process

- 1) **Employee** completes self-evaluation in the EMPLOYEE SECTIONS for each area of evaluation.
- 2) **Employee** signs verifying self-evaluation is complete and **submits** to **Supervisor** for response.
- 3) **Supervisor** completes the SUPERVISOR SECTIONS for each area of evaluation.
- 4) **Supervisor** signs verifying their response is complete and **submits** to **employee** for review and/or additional comments. A meeting with the employee is *recommended* before next step to allow for discussion.
- 5) **Employee** may record **additional comments** (optional) and **signs verifying receipt** of completed evaluation.
- 6) The form routes to **Division VP**, if applicable, for **signature verifying receipt** before final **routing to HR**.

Rating Scale

- **Significantly Exceeds Expectations** – work is performed in a distinguished superior manner achieving all goals at a level significantly above expectations; very few employees will achieve this rating.
- **Exceeds Expectations** – work is performed with a high degree of competence and all goals are achieved at a level typically above standard.
- **Meets Expectations** – work is performed in an acceptable manner achieving goals at a level that meets the standard.
- **Does Not Meet Expectations** – work is performed below the standard requirement; has trouble meeting some goals; room exists for improvement.
- **Unsatisfactory** - significantly deficient in skills and abilities.

Areas of Evaluation

- Quality of Work
- Management of Workload/Organization Skills
- Attendance and Availability
- Communication Skills
- Constituent Service
- Work Attitudes
- Interpersonal Skills

Evaluation Schedule	
Employee self-eval period ends	June 30
Employee self eval due to supervisor	July 15
Supv completes eval and reviews w/employee	August 15
Supv submits completed eval to Division VP	August 31
Division VP reviews and submits to HR	September 15

Contact HR@westfield.ma.edu for assistance.

This form available at <https://www.westfield.ma.edu/offices/hr-titleix-eo/forms-and-resources>

Quality of Work – Produces accurate, neat, and thorough work, whether self-initiated or supervised; takes pride in work; demonstrates professional skills and knowledge of the responsibilities and duties assigned to the position.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Management of Workload/Organization Skills – Organizes and prioritizes work appropriately; meet deadlines; produces the required amount of work to meet the needs of the institution; completes work in a timely and thorough manner; is results oriented and assumes responsibility and accountability for own work.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Attendance and Availability – Conforms to established work schedule; is available to perform responsibilities and provide administrative support; answers messages and inquiries in a timely manner.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Communication Skills – Effectively communicates with others in writing and speaking, listens carefully, represents the University well in internal and external communications; informs supervisors of status of projects and key issues.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Constituent Service – Responds quickly and in a friendly manner to requests from students, faculty, staff, administrators, and the external community; is courteous and helpful to others; assists constituents efficiently avoiding unnecessary referrals to other offices or agencies.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Work Attitudes – Endeavors to improve work techniques; accepts supervision and feedback, constructive criticism and responsibility; projects a positive image; demonstrates initiative and flexibility.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

Interpersonal Skills – Has effective working relationships with others; treats others with civility and respect; works collaboratively as part of a team.

EMPLOYEE SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

SUPERVISOR SECTION

Rating: ☐ Significantly Exceeds | ☐ Exceeds | ☐ Meets | ☐ Does Not Meet | ☐ Unsatisfactory

Response:

PART III: ACCOMPLISHMENTS AND GOALS

Accomplishments: Identify any extraordinary achievements, notable service, or exemplary contributions to the university community made within this evaluation period.

EMPLOYEE RESPONSE:

SUPERVISOR RESPONSE:

Goals: Identify goals for the upcoming evaluation period.

EMPLOYEE RESPONSE:

SUPERVISOR RESPONSE:

PART IV: ADDITIONAL COMMENTS AND SIGNATURES

Employee Comments (optional):

Supervisor Comments (optional):

Signatures

Employee **Self-Eval** Completed By: _____ Date: _____

Supervisor **Eval** Completed: _____ Date: _____

Employee **Receipt** of Supervisor Eval: _____ Date: _____
(Does not imply agreement with the evaluation)

Received by Human Resources: _____ Date: _____