SECTION 1 – EMPLOYEE IDENTIFICATION	
Employee's Name	Evaluation Period Ending
	(mo./day/yr.)
Title and Grade	Item Number
Agency	Facility/Division
SECTION 2 – PERFORMANCE PROGRAM (At	tach additional sheets if necessary.)
A. TASKS/OBJECTIVES: List the major tasks, assignments, activities, and results to be during the evaluation period.	B. PERFORMANCE STANDARDS: List observable criteria for determining if objectives/tasks are fully met/performed. Criteria should be quantitative wherever possible.
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
basis upon which job performance will be apprai	signments, and activities indicated above. This performance program is the sed and rated on the annual rating date. The employee has had an ards for consideration in the performance program.
Supervisor	
(Signature)	(Date)
Employee(Signature)	(Date)

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Describe the employee's performance in accomplishing tasks of achieving objectives specified in the Individual Performance Program. Explain how the employee's performance has exceeded or not met the performance standards. Be as specific and quantitative as possible.
1.
2.
3.
J.
4.
5.
6.
7.
1.
(Attach additional sheets if necessary.)
SECTION 2 – RECOMMENDED TRAINING, DEVELOPMENT, AND PERFORMANCE IMPROVEMENT ACTIVITIES
SECTION 3 – PERFORMANCE RATING (Check One.)
DOLITETANDING DUIGHLY EFFECTIVE DEFECTIVE DIFFERS INADDOLITATED DIVINISATISES COOPY
OUTSTANDING HIGHLY EFFECTIVE EFFECTIVE NEEDS IMPROVEMENT UNSATISFACTORY
SECTION 4 – CERTIFICATION
Supervisor Signature Date
(PRINT OR TYPE)
(FRINT OR TIFE)
Designation Deta
Reviewer Signature Date
(PRINT OR TYPE)
(Optional unless rating is "Outstanding" or "Unsatisfactory" or otherwise specifically required by the agency.)
IMPORTANT: HUMAN RESOURCES IS REQUIRED TO MAINTAIN A COPY OF YOUR MOST CURRENT RESUME.
Resume Attached No Updates; Current One on File with HR
(12/2016)

(12/2016)