

**CUNY Office Assistants (in academic offices)
Performance Evaluation Form and Instructions
The City University of New York**

Instructions to the Department Chair

Background:

As Chair, you have an ongoing responsibility to direct the work of this employee and to coach the employee for improved performance.

Annually (more frequently for probationary employees) you are also asked to evaluate in writing how she or he is performing Critical Job Functions. Clarifying your current expectations (and those for the future) is the chief ingredient in improving employee performance and in getting the results you want. Doing this in a consultation with the employee is the most effective means of gaining understanding and commitment for carrying out these tasks.

Annual Goal Setting

The review period is the twelve-month academic year beginning on or about September 1. In September, review the Critical Job Elements in the first column of the rating form. Refer to **ATTACHMENT A: Performance standards for definitions.** (Not every element will be performed by every employee.) Select those Elements to be performed in this review period and mark them with an (X). Discuss with the employee any changes that you are making from the past year. In addition, you may emphasize for the employee **Related Specific** improvement goals (e.g., improve spelling in first drafts) to meet in the review period. Note these in the first column of the rating form along with other job elements. (If possible, also write) these in the column for Improvement Goals in attachment A with appropriate standards. While you have the final say, reaching agreement on these goals will be more beneficial. Keep in mind that communication is the key purpose of this performance review. Also, you may share with the employee a copy of **Attachment A: Performance Standards.** This is the backup you will use when you are conducting the evaluation, usually in the late spring.

With the concurrence of the college personnel director, you may add noncritical job elements to the form and to Attachment A (example distribution payroll check for staff). Spaces provided (*Other). You may also strike/add more specific or clarifying phrases in the description of Performance Standards for the review period. When complete, share a copy with the employee, preferably by October 15th each year in which there are changes in expectations.

Annual Reviews and Documentation

The primary annual review session is to be conducted **late in the spring semester.** (A follow-up review of summer activity may occur in September at your discretion, in conjunction with the annual goal setting for the coming academic year).

Prior to the annual review session, enter in the far-right column the proposed rating on each element you had identified with an (X) in the first column. Choices are:

U = Unsatisfactory (consistently performs a task in an unacceptable manner)

M = Marginal (slips below satisfactory performance too often, but can improve)

G = Good (with few exceptions provides consistent, satisfactory results).

VG = Very Good (often meets high performance standards; consistently exceeds expectations).

O = Outstanding (provides consistent, exceptional service with the highest productivity).

Standards are provided in a separate document for the categories of “Good” and “Outstanding” to assist you engaging your employee’s performance. These are the standards you have a right to expect in which the employee has been told you will use. Assume lesser standards of performance for U or M ratings; VG exceeds standards of “Good” performance. Take into account progress towards the improvement goals which you had specified. Discussed the proposed ratings with the employee. In most cases, you and the employee will be able to agree on the outcomes. When this is not possible, the evaluation should reflect your views. For Marginal or Outstanding ratings, consider a training plan (course or activities) which will bring performance up to par or will enhance excellence. On the last page, fill in the summary evaluation (U, M, or Satisfactory) and complete the signature section. The college may require that a second level supervisor, perhaps a Dean, sign the evaluation. This person may also amend the evaluation. When the employee has signed the final evaluation (or refused to do so), send the original copies of the College Personnel Officer. Note the invitation to both employee and evaluator to add comments (which, for the employee, may take the format of a rebuttal).

APPROVED
[Signature] 3/15/13

College _____
 Ratee's Name _____

The City University of New York
Annual Performance Evaluation Form For
CUNY Office Assistants in Academic Departments (Levels 1-3)
 (See page 1 for Instructions and Attachment A for Standards)

| | To be completed at the <u>Beginning</u> of the Performance Period | To be completed at the End of the Performance Period | |
|---|---|--|--|
| Competence Area and Core Elements | Specific Improvement Goals for the Current Performance Period: Only use this space to clarify or amplify standards found in Attachment A, or to add "other" duties. | Rating in Core Job Elements (U,M,G, VG, O: See Attachment A). Indicate N/A if not part of duties | Training Improvement Plan: Required for Marginal (M) |
| 1. Departmentwide Services A. Day-to-Day Operations Mail Phones Supplies Reprographic Services B. Office Coverage when away | <hr/> | Enter Rating Symbol: _____ _____ _____ _____ _____ | <hr/> |
| 2. Service to Chair: A. Correspondences B. Calendar Chair's Course Schedules C. Filing D. Faculty Searches E. Departmental meetings/college committees F. Professional organization assignments G. Course Textbooks | | _____ _____ _____ _____ _____ _____ _____ _____ | |

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[Signature] 3/15/13

| | To be completed at the <u>Beginning</u> of the Performance Period | To be completed at the End of the Performance Period | |
|--|---|---|--|
| Competence Area and Core Elements | Specific Improvement Goals for the Current Performance Period: Only use this space to clarify or amplify standards found in Attachment A, or to add "other" duties. | Rating in Core Job Elements (U,M, G, VG, O: See Attachment A). Indicate N/A if not part of duties | Training Improvement Plan: Required for Marginal (M) |
| 3. Service to Faculty A. Routine word processing or typing B. Confidential word processing C. Production of materials/securing instructional materials D. Individual make-up examinations E. Special purchasing F. Special events/conferences/and site-visits | | _____ _____ _____ _____ _____ _____ | |
| 4. Service to Students A. Course and class information B. Other departments/college information C. Student assistance D. Appointments and registration | | _____ _____ _____ _____ | |
| 5. Services to College Administrative Departments A. Evaluations for faculty/observations for adjuncts B. Forms (e.g., Personnel, Budget, etc.) C. Special requests and responses D. Other (if added by College) | | _____ _____ _____ _____ | |

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 3/15/13

| | To be completed at the <u>Beginning</u> of the Performance Period | To be completed at the End of the Performance Period | |
|--|---|---|--|
| Competence Area and Core Elements | Specific Improvement Goals for the Current Performance Period: Only use this space to clarify or amplify standards found in Attachment A, or to add "other" duties. | Rating in Core Job Elements (U,M, G, VG, O: See Attachment A). Indicate N/A if not part of duties | Training Improvement Plan: Required for Marginal (M) |
| 6. Services to College Officials, Other CUNY Colleges, and Eternal Community A. Department information B. Other (if added by College) | | | |
| 7. Services to Members of University/College/Community A. Attention to assigned meetings B. Special assignments C. Other (if added by College) | | | |
| 8. Supervision of Subordinates in the Department: (only for Supervisory COA's) A. Assignment of work B. Training C. Selection of new Staff D. Evaluation of Performance E. Time and Leave F. Motivation and coaching of employees | | | |



_____ College
_____ Academic Department


**Annual Performance Evaluation Form For
CUNY Office Assistants in Academic Departments
Overall Evaluation and Signatures**

Supervisor's Overall Rating:

First Level:

For the Performance Period from _____(year) to _____, I have reviewed the performance of this employee against the **COA (Academic Departments) Performance Standards** provided in **Attachment A** and believe the overall rating for this year is: _____ U (Unsatisfactory); M (Marginal); S (Satisfactory).


Print Name/Title

Select  to sign/Date

Second Level Supervisor:

_____ I concur with the rating above. _____ I do not concur with the rating above. _____ I have attached an explanation or amended the form as shown.
The overall rating shall be _____ (U, M, S).


Print Name/Title

Select  to sign/Date

Ratee's Signature:

I have read the above performance rating for the year. I am aware that I may file a response, if I choose to, with the personnel Office of my college. It will be placed in my personnel file.


Print Name/Title

Select  to sign/Date

Personnel Officer's Certification:

I have reviewed the supervisor's evaluation and the ratee's statement (if any). I believe the form to be completed and in accordance with the guidance provided for evaluation of employees serving in this title. This form shall be made part of the employee's official Personnel File.

Print Name/Title

Select  to sign/Date

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 3/15/13