**TLT Performance Evaluation Template**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Term-limited temporary (TLT) employees are not members of the Career Service System. TLT employees are at will employees who serve at the pleasure of the appointing authority. A TLT employee may be terminated from employment at any time with or without cause or prior notice.*  *For purposes of performance management, written performance feedback and performance expectations may**occur annually.* | | | | | | | | |
|  | | | | | | |  | |
| **Employee Name:** | | | | | | |  | |
| **Department:** | | | | | **Division:** | | | |
| **Ten Digit Position Number** (if applicable)**:** | | | | | | |  | |
| **Rating Period:** | | | | | | | | |
| **1**  **Criteria Letter** | **2**  **Weight** | **3**  **Rating** | **4**  **Score**  **(2x3)** | **Criteria and Comments** | | | | |
| **A** |  |  |  | **Accomplishment of Job Requirements:** | | | | |
| **B** |  |  |  | **Work Relationships with Co-workers:** | | | | |
| **C** |  |  |  | **Dependability and Reliability:** | | | | |
| **D** |  |  |  | **Gathers and Uses Information:** | | | | |
| **E** |  |  |  | **Job Knowledge and Technical Competence:** | | | | |
| **F** |  |  |  | **Diversity:** | | | | |
| **G** |  |  |  | **Work Relationships w/other Depart./Div./Clients and the Public:** | | | | |
| **H** |  |  |  | **Imagination and Initiative in Performance of Job:** | | | | |
| **I** |  |  |  | **Oral / Written Communication:** | | | | |
| **J** |  |  |  | **Makes Decisions and/or Recommendations within the Scope of the Position:** | | | | |
| **K** |  |  |  | **Meets Work Deadlines:** | | | | |
| **L** |  |  |  | **Cost Consciousness:** | | | | |
| **M** |  |  |  | **Quantity of Work:** | | | | |
| **N** |  |  |  | **Safety:** | | | | |
| **O** |  |  |  | **Supervision:** | | | | |
| **P** |  |  |  | **Other** (e.g., punctuality) | | | | |
| **Total** |  |  |  | **Performance Score\*:** | |  | | **\* Performance Score = Total Score [Column 4] divided by Total Weight [Column 2]** |

**Rater Comments**:

**Development Program** for next rating period (attach additional sheets if necessary):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rater’s Signature

**Employee Comments**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_