Academic Professional Review

Department/Unit:

Name:

Position Title:

Supervisor:

Date Appointed:

Date of Review:

## Major Duties & Responsibilities

(Supervisor and employee list major duties and responsibilities for the review period.)

# Denotes High importance of task

\* Denotes Medium importance of task

+ Denotes Low importance of task

## Review of Accomplishments

(Supervisor summarizes employee performance in terms of quality, productivity, creativity, communication skills, leadership etc.)

## Comments and Concerns

(Comment on your performance, special accomplishments and improvements, and if desired, on the supervisor’s comments and supervision. If your goals were not met last year, please comment on reasons they were not attained.)

## Employee and Supervisor goals for the coming year

(Include how employee fits into the department and its mission.)

**The employee and supervisor discussed and understand the contents of this review.**

### Employee

Employee Signature

Date

### Supervisor

Supervisor Signature

Date

### Department Head

Department Head Signature

Date