SKIDMORE
COLLEGE

**ANNUAL EMPLOYEE PERFORMANCE REVIEW**

**Name:**_____ **Title:** _____

**Department:**_____ **Supervisor:**_____

**Review Period From:**_____ **To:**_____

**Date of Review Discussion:**_____

**Overall Performance:**_____
(***Supervisor's response: Successful OR Currently Not Successful***)

## GOALS AND RESULTS

***What goals and/or responsibilities have gone well this year?***

| Employee Response | Supervisor Response |
|---|---|
| | |

***What goals and/or responsibilities are areas for improvement and what support is needed?***

| Employee Response | Supervisor Response |
|---|---|
| | |

## BEHAVIORS AND SKILLS (reference: Skidmore Competencies)

***What behaviors and skills contribute to success?***

| Employee Response | Supervisor Response |
|---|---|
| | |

***What behaviors and skills are areas for development and what support is needed?***

| Employee Response | Supervisor Response |
|---|---|
| | |

**BELONGING *(optional question for FY24 review)***

***What contributions have you made to create a welcoming and inclusive environment where others feel heard, empowered, and like they belong?***

| Employee Response | Supervisor Response |
|---|---|
| | |

**ANNUAL GOALS AND OBJECTIVES**

Employees should list their goals and objectives for the coming year in coordination with their supervisor. Goals may be updated throughout the year as necessary.

Goals to accomplish from _____ to _____.

***Individual Goals to Meet Department Objectives***

| |
|---|
| |

***Individual Goals for Professional Development and Growth***

*What are professional interests/goals and what support is needed to achieve them?*

| |
|---|
| |

*I acknowledge that I have received a copy of this document and have discussed its content with my Supervisor. My signature does not necessarily indicate agreement with any specific statement(s) included above, and I reserve the right to provide a written response, should I choose to do so.*

_____
Employee's Signature

_____ Date_____
Printed Name

_____
Supervisor's Signature

_____ Date_____
Printed Name

**Reminder: Signed Originals of Performance Reviews must be filed with Human Resources annually.**