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# DIRECTOR/COMMISSIONER/CHIEF/

# DEPARTMENT HEAD

# PERFORMANCE EVALUATION REVIEW

**This is an example of a Performance Evaluation Review template that a Chief Administrative Officer/City Manager can use for a Director/Commissioner/Chief/Department Head. This form is completed by the CAO/City Manager and the employee and reviewed during the performance evaluation. The mandate letter is also used as part of the performance evaluation process.**

Performance Review for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

Questions asked by Chief Administrative Officer:

1. Assess your adherence to your mandate letter for the review period.

Employee’s Comments:

CAO’s Comments:

1. Overall, are you satisfied with your performance over the past twelve months? Discuss.

Employee’s Comments:

CAO’s Comments:

1. Are you clear about what is expected of you in this position?

Employee’s Comments:

1. What do you believe the strengths of your performance are?

Employee’s Comments:

CAO’s Comments:

1. What is the one thing that you would like you to focus on **in order to improve your performance over the next year**?

Employee’s Comments:

CAO’s Comments:

1. Is there one particular aspect of your job that you would like to focus on over the next year?

Employee’s Comments:

CAO’s Comments:

1. Do you have any concerns about the direction of the Department that you would like to see addressed?

Employee’s Comments:

CAO’s Comments:

1. Do you have any concerns about the direction of the City that you would like to see addressed?

Employee’s Comments:

1. Do you have any expectations relative to career development, training, etc. that you would like to communicate?

Employee’s Comments:

CAO’s Comments:

Name of Employee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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