

**This is an example of a Performance Evaluation 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 Evaluation (Director/Commissioner/Chief/Department Head)**

|  |  |
| --- | --- |
| Name of Employee |  |
| Evaluation Period |  |
| Name of Chief Administrative Officer |  |

An annual performance evaluation should be an important part of the relationship between the CAO and the direct report, and the CAO, and ultimately the success of the municipality. The main purpose is to have an informal discussion about the past year.

**Questions**

|  |  |  |
| --- | --- | --- |
| **Question** | **Employee’s Comments** | **CAO’s Comments** |
| 1. Assess your adherence to your mandate letter for the review period. |  |  |
| 1. Overall, are you satisfied with your performance over the past twelve months? Discuss |  |  |
| 1. Are you clear about what is expected of you in this position? |  |  |
| 1. What do you believe the strengths of your performance are? |  |  |
| 1. What is the one thing that you would like to focus on in order to improve your performance over the next year? |  |  |
| 1. Is there one particular aspect of your job that you would like to focus on over the next year? |  |  |
| 1. Do you have any concerns about the direction of the Department that you would like to see addressed? |  |  |
| 1. Do you have any concerns about the direction of the City that you would like to see addressed? |  |  |
| 1. Do you have any expectations relative to career development, training, etc. that you would like to communicate? |  |  |

**Employee Personal Annual Development Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| **Development Objective** | **Specific Experience/Course/Activity** | **Target Completion Date** | **Completed Yes/No** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Signature

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAO’s Signature

Date