

Kansas State University

Employee Performance Review

Performance on Goals and Projects

(Optional)

Employee Name: _____ **Employee ID:** _____
(Last, First, MI)

Department Name: _____ **Job Title:** _____

Performance Review Period From: _____ **to** _____

This form is used to evaluate goals, special assignments, or committee involvement performed during the evaluation review period. Many goals or special assignments are regularly present in supervisory level positions. However, we encourage all employees to consider having at least one goal or project to focus on during the upcoming evaluation review period. In the space provided below, briefly summarize each goal or special assignment that demands significant time and effort during the evaluation period. If the assignment was not completed during the evaluation period, evaluate progress to date.

Goal or Project	Observations

Acknowledgement of Goals: *(At the beginning of the review period)*

Employee _____ Date _____

Supervisor _____ Date _____

Acknowledgement of Observations: *(At the end of the review period)*

Employee _____ Date _____

Supervisor _____ Date _____

(This form is optional. If completed, attach to Employee Performance Review, PER-47 when submitted to the Division of Human Resources.)