

**POINT LOMA NAZARENE UNIVERSITY
PERFORMANCE EVALUATION – EXEMPT STAFF**

NAME _____ POSITION _____ DATE _____, 2015
Supervisor Name _____

The University has identified the following as important dimensions of success for all exempt staff members:

Planning and Organization: Establishes priorities and meets goals and objectives on time. Uses Point Loma’s resources prudently.

Adaptability: Readily meets changing conditions and work assignments.

Productivity: Has a consistently high level of performance in terms of volume and accomplishments.

Customer Service: Demonstrates a positive attitude in responding to customer requests and concerns. (Note: There may be multiple customers: students, PLNU employees from other departments, external constituencies.)

Relationships: Fosters a congenial and harmonious atmosphere within department that encourages employees to work together in a spirit of cooperation and team work.

Decision Making/Judgment: Demonstrates creativity and flexibility in decision making. Explores all problems objectively, considering implications and alternatives before making timely decisions.

Supervisory Ability (If Applicable): Is sensitive to the needs and abilities of subordinates. Effectively supervises and delegates work to subordinates. Conducts effective performance evaluations of subordinates. Clearly identifies responsibilities and goals and provides constructive guidance.

Communication Skills: Listens to and communicates effectively with subordinates, peers and supervisors. Contributes effectively to staff discussions and meetings. Produces clear reports and correspondence.

Initiative: Anticipates what has to be done and takes action. Implements new methods or procedures to increase efficiency of department. Is willing to work beyond ordinary requirements when necessary.

Professional Self-Improvement: Has knowledge of current development in his/her field. Pursues professional growth opportunities.

Institutional Commitment: Demonstrates concern for the overall welfare of Point Loma as well as job specific responsibilities. Promotes good public relations by responding positively to customer requests and concerns.

Taking the above dimensions into account:

1. Describe this individual’s key accomplishments and/or contributions during this review period. To what extent have last year’s goals been achieved?

2. Identify the particular strengths that this individual demonstrates in doing his/her job and in supporting the overall success of the University.

3. Were performance concerns identified in last year's review? Yes No

If so, have they improved to a level that meets expectations? Yes No Partial

Comments (evaluation of the achievements):

4. (For Departments required to comply with NCAA guidelines) Does this person demonstrate knowledge of and compliance with all PacWest and NCAA rules and regulations?

Yes No N/A

5. Is this individual meeting the established expectations for this position

Yes No (Performance Improvement Plan Required) Partial (add comments below)

Comments:

6. Goals for the Year

Have the goals set in last year's review been accomplished? Yes No Partial

Comments:

Establish specific goals for the coming year (minimum of 2):

Goal:
Due Date:

Goal:
Due Date:

Goal:
Due Date:

7. Development Objectives

Have the development objectives from last year's review been accomplished? Yes No Partial

Comments:

Establish professional or personal development objectives. Include specific training objectives for the next year. A minimum of one is required.

Objective:
Due Date:
Action Plan:

Objective:
Due Date:
Action Plan:

8. Job Description Review: Review the current job description and indicate the action that was taken.

- No changes were made
- Changes were made – updated copy sent electronically to Human Resources.

Employee signature below indicates the following:

- You have read and discussed the review with your supervisor
- You agree to respect and abide by the Community Life Covenant as affirmed by the Board of Trustees of Point Loma Nazarene University

Note: Employee signature does not necessarily indicate agreement with the contents of the evaluation.

Employee _____ Date _____

Supervisor _____ Date _____

Comments by staff member receiving evaluation: