

Human Resources, Diversity & Inclusion, Haggerty 603
x3171 Fax: x3956

INSTRUCTIONS: This cover sheet is to be completed, signed, and attached to all performance evaluations for Professionals when a **contract renewal is not due**. The Human Resources Office will place this form and the completed evaluation in the evaluatee's personnel folder.

Date _____

Name of Employee _____ Title _____

Department _____

Evaluator _____ Title _____

Period of Evaluation: From _____ To _____

SUMMARY CHARACTERIZATION (check one): Satisfactory Unsatisfactory

- Check One: A new Performance Program is attached
 The present Performance Program is affirmed

I have reviewed a copy of this evaluation and have had the opportunity to discuss it with my supervisor.

Employee Signature _____ Date _____

REVIEW

Department Head/Dean _____ Date _____

Vice President _____ Date _____

Received by the Office of Human Resources:

Signature _____ Date _____