

Instructions for Use of the Performance Management Form (PMF)

General

The Performance Management Form (PMF) is used to document employee performance plans and two types of evaluations based on those plans. The evaluations documented on the PMF are:

- (1) annual performance evaluations leading to salary increase recommendations, and
- (2) evaluations performed at the end of working test periods to support permanent status decisions.

Please note:

- (1) To document permanent status decisions, agencies may choose to use the shorter Management Review Form (MRF), rather than using the PMF.
- (2) The MRF cannot be used to document a salary increase decision; a full evaluation, documented on the PMF, is required for the annual performance evaluation that determines salary increase recommendations.
- (3) The same PMF may be used to document both a salary increase decision and a permanent status decision, so long as:
 - (a) the same performance plan is in effect,
 - (b) the PMF documenting one type of decision has been completed no more than 90 days prior to the effective date for the other type of decision, and
 - (c) the agency policy does not require that a new PMF be completed.
- (4) A PMF must be completed and signed not more than 90 days prior to the effective date of a salary increase.

The PMF consists of nine sections:

- | | |
|--|-----------------------------------|
| 1: Employee Information | 6: Salary Increase Recommendation |
| 2: Performance Plan Signatures | 7: Employment Status |
| 3: Job and Individual Responsibilities | 8: Evaluation Signatures |
| 4: Terms and Conditions of Employment | 9: Employee Development Plan |
| 5: Overall Ratings | |

Additional pages may be attached to any section of the form if space is insufficient.

Planning

- Prior to the beginning of the new performance period, the supervisor:
- enters in Section 3 responsibilities and performance expectations for the employee and indicates which responsibilities are critical to the job;
 - enters under Performance Expectations in Section 4 any additional expectations related to terms and conditions of employment that are specific to the job or work unit;
 - reviews the preliminary plan with his or her manager to ensure that the proposed responsibilities and expectations are appropriate in light of overall unit plans and work assignments.

In a planning session at the beginning of the performance period, the supervisor and the employee:

- discuss the responsibilities and expectations for the coming year, making changes or additions as necessary in Section 3.

Annual Performance Evaluation

- review the pre-printed "statewide" responsibilities in Section 3 and check the boxes that apply to the employee and the job. (Each agency should have a policy on whether inclusion of any or all of these responsibilities is required on every employee's Plan or is discretionary on the part of the supervisor.);
- review the preprinted Performance Management Responsibility in Section 3 and, if the employee directly supervises other employees, mark it as "Critical";
- review the expectations related to terms and conditions outlined in Section 4;
- identify any developmental or training goals for the upcoming performance period and enter in Section 9;
- enter signatures and dates in Section 2. (The PMF, with responsibilities and expectations entered, constitutes the employee's individual Performance Plan. After the Plan is reviewed and signed by the reviewing manager, the supervisor retains a copy, gives a copy to the employee, and processes/files other copies as directed by agency policy.)
- if a significant change is made to the Performance Plan during the year, following discussion of the change, the supervisor should have the employee sign in the indicated space in Section 2.

Annual Performance Evaluation

At the end of the performance period, the supervisor uses the Performance Management Form to document the evaluation of the employee's performance. The supervisor rates the employee's performance on the individual items in Sections 3 and 4. In Section 9, the supervisor notes any progress the employee has made in meeting developmental or training goals. In Section 5 the supervisor enters an overall rating for Job and Individual Responsibilities and an overall rating for Terms and Conditions of Employment.

In Section 6, the supervisor indicates whether the employee is eligible for a performance increase. (Actual awarding of increases is subject to availability of funds and to modification of pay delivery policies.) In order to be eligible, the employee must receive an overall rating of Met Expectations or higher on the Job and Individual Responsibilities component of the evaluation. An employee who receives an overall rating of Did Not Meet Expectations or either Responsibilities or Terms and Conditions is *not* eligible for an increase. Employees receiving an overall rating of Needs Improvement on the Terms and Conditions may or may not be eligible for a performance increase, depending on individual agency policy.

The completed PMF is reviewed by the supervisor's manager. The supervisor then conducts the performance evaluation meeting with the employee. Both parties sign the document in Section 8 to indicate that the meeting has taken place. After the PMF is signed by the reviewing manager, it is filed according to agency policy, a copy is given to the employee, and the supervisor retains a copy.

Permanent Status Review

If the PMF is used to document an evaluation leading to the granting of permanent status, the form is completed in the same way as for an annual performance evaluation, but instead of indicating a salary increase recommendation in Section 6, the supervisor puts a checkmark in the "Permanent Status Approved" box in Section 7 (or puts checkmarks in both sections, if the PMF is being used simultaneously for both types of evaluation). Follow agency policy for filing and distribution of copies.

State of Georgia
PERFORMANCE MANAGEMENT FORM
(PMF)

Department Name _____ Print Date _____

Department ID _____

Section 1: Employee Information

Last Name, First Name MI	Employee ID	Position No.	Performance Period
Class/Job Title	Class/Job Number	Supv. Position No	From: _____ to: _____ Supervisor's Title and Class/Job Number

Section 2: Performance Plan Signatures

<p>Performance Plan Signatures--Employee</p> <p>I understand my job and individual responsibilities, the performance expectations, and the terms and conditions under which I am expected to work.</p> <p>Comments: _____</p> <p>_____ Date</p> <p>I understand the changes made to my responsibilities and performance expectations or terms and conditions.</p> <p>_____ Date</p> <p><input type="checkbox"/> Annual Performance Evaluation <input type="checkbox"/> Permanent Status Evaluation</p> <p>Agency Official to whom request or review of the contents of this form should be submitted. (SPB Rule PAR 13.305)</p>	<p>Performance Plan Signatures--Supervisor/Manager</p> <p>I have discussed the job and individual responsibilities, performance expectations, and terms and conditions with the employee.</p> <p>Comments: _____</p> <p>_____ Date</p> <p>I have reviewed the Performance Plan and find the requirements appropriate.</p> <p>Comments: _____</p> <p>_____ Date</p> <p><input type="checkbox"/> Personnel File <input type="checkbox"/> Employee Copy <input type="checkbox"/> Supervisor Copy</p> <p>_____ Date _____ Date</p> <p>_____ Employee Signature _____ Evaluating Supervisor Signature</p> <p>_____ Employee Signature _____ Reviewing Manager Signature</p>
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Section 3: Job and Individual Responsibilities

Instructions: Describe the employee's key responsibilities. These may be Job Responsibilities (ongoing responsibilities typically performed by incumbents in the job) or Individual Responsibilities (responsibilities assigned to this particular employee, such as time-limited special projects or individual developmental goals). Indicate the responsibilities -- typically no more than three -- that are critically important to successful performance of the job. Describe performance expectations for each responsibility. At the end of the performance period, describe the employee's actual performance and indicate the rating achieved.

Job or Individual Responsibility	Performance Expectations	Actual Performance	Performance Rating
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded

Responsibility	Performance Expectations	Actual Performance	Performance Rating
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Critical			<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<p>Instructions: Performance Management is a key responsibility of all supervisors and must be marked as critical on each supervisor's performance plan. Check "Not Applicable" only if employee does not supervise.</p> <p><input type="checkbox"/> Not applicable <input type="checkbox"/> Critical</p> <p>Performance Management Responsibility Creates and maintains a high performance environment characterized by positive leadership and a strong team orientation.</p>	<ol style="list-style-type: none"> 1. Defines goals and/or required results at beginning of performance period and gains acceptance of ideas by creating a shared vision. 2. Communicates regularly with staff on progress toward defined goals and/or required results, providing specific feedback and initiating corrective action when defined goals and/or required results are not met. 3. Confers regularly with staff to review employee relations climate, specific problem areas, and actions necessary for improvement. 4. Evaluates employees at scheduled intervals, obtains and considers all relevant information in evaluations, and supports staff by giving praise and constructive criticism. 5. Recognizes contributions and celebrates accomplishments. 6. Motivates staff to improve quantity and quality of work performed and provides training and development opportunities as appropriate. 		<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded

Instructions: Listed below are responsibilities which support the State's strategic goals. If any of these "statewide" responsibilities do not apply, they should be marked "not applicable." Check the appropriate box to indicate whether the responsibility is "not applicable," "applicable" or both "applicable and critical."

Responsibility	Performance Expectations	Actual Performance	Performance Rating
<input type="checkbox"/> Not Applicable <input type="checkbox"/> Applicable <input type="checkbox"/> Applicable and Critical Teamwork Encourages and facilitates cooperation, pride, trust, and group identity; fosters commitment and team spirit; works cooperatively with others to achieve goals.	<ol style="list-style-type: none"> 1. Communicates accurate information to others in a professional and courteous manner; conveys a willingness to assist. 2. Shows consideration for others; works cooperatively with any co-worker; provides constructive feedback without undue criticism of others; displays appreciation of differences in approaches, personalities, and viewpoints of others. 3. Solicits input of those who are affected by plans or actions; gives credit and recognition to others who have contributed; demonstrates concern for treating people fairly and equitably. 4. Accepts responsibility for own mistakes and takes action to prevent similar occurrences; works to resolve conflicts and to identify solutions in which all parties benefit. 5. Identifies team goals and ways to work with coworkers to accomplish these goals; works to keep group activities productive/focused on results. 		<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Not Applicable <input type="checkbox"/> Applicable <input type="checkbox"/> Applicable and Critical Customer Service Works and communicates with the general public, internal customers and/or external customers to provide information and quality services and/or products targeted to meet customer expectations.	<ol style="list-style-type: none"> 1. Treats customers with respect, courtesy and tact; listens to customer and interacts with customer as a person while maintaining business relationship. 2. Communicates with customers and obtains all information necessary to determine and address their specific needs; tactfully explains why, if service cannot be provided. 3. Offers options, as appropriate, so that customers can decide what they want to do; demonstrates fairness and good judgement when seeking possible exceptions or in going the extra mile to meet customers' expectations. 4. Responds to customers in manner and timeframe promised or follows up to explain status; demonstrates understanding of, and concern for, the customer's situation and perspective. 5. Provides clear, accurate information; explains procedures or materials or provides supplemental information; anticipates problems and questions; asks for customer feedback on procedures, products or services. 		<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded
<input type="checkbox"/> Not Applicable <input type="checkbox"/> Applicable <input type="checkbox"/> Applicable and Critical Organizational Commitment Displays a high level of effort and commitment to performing work; operates effectively within the organizational structure; demonstrates trustworthiness and responsible behavior.	<ol style="list-style-type: none"> 1. Demonstrates eagerness to learn and assume responsibility; seeks out and accepts increased responsibility; displays a "can do" approach to work. 2. Shows persistence and seeks alternatives when obstacles arise; seeks alternative solutions; does things before being asked or forced to by events. 3. Works within the system in a resourceful manner to accomplish reasonable work goals; shows flexibility in response to process changes and adapts to and accommodates new methods and procedures. 4. Accepts direction and feedback from supervisors and follows through appropriately. 		<u>Expectations</u> <input type="checkbox"/> Did Not Meet <input type="checkbox"/> Met <input type="checkbox"/> Exceeded

Section 4: Terms and Conditions of Employment

Instructions: Every employee must be evaluated on each of the five categories of terms and conditions shown below. Specific performance expectations that pertain to the agency, the work unit, or the particular job should be entered under Performance Expectations. At the end of the performance period, describe the employee's actual performance and indicate the appropriate rating for each category.

Terms and Conditions	Performance Expectations	Actual Performance	Performance Rating
<p><u>Works When Scheduled</u> Works when scheduled; begins and ends work as expected; calls in according to policy when arriving late for work or when absent; observes provisions of Fair Labor Standards Act; observes policies on break and lunch periods; uses work time appropriately.</p>	<p>As indicated by policies (3200 series)</p>		<p><input type="checkbox"/> Did Not Meet <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Met</p>
<p><u>Requests and Uses Leave Appropriately</u> Submits leave requests on a timely basis. Requests and uses the proper type of leave in accordance with established rules and policies. Provides documentation for use of leave when required.</p>	<p>As indicated by policies (3200 series)</p>		<p><input type="checkbox"/> Did Not Meet <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Met</p>
<p><u>Dresses Appropriately</u> Presents a neat, clean appearance; dresses appropriately for job. Practices personal hygiene. Wears clothing suitable to job task and environment based on clientele served. Wears full, regulation uniform, if required.</p>	<p>As indicated by work-site policy</p>		<p><input type="checkbox"/> Did Not Meet <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Met</p>
<p><u>Observes Health, Safety and Sanitation Policies</u> Observes established policies on health, safety, security and sanitation; notifies proper authorities of circumstances or situations that present potential health hazards.</p>	<p>As indicated by policies (1200 series)</p>		<p><input type="checkbox"/> Did Not Meet <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Met</p>
<p><u>Follows All Other Rules and Policies</u> Performs work according to rules, regulations, policies, and guidelines. Ensures required licenses and certifications are current. Does not improperly use or knowingly permit others to use state property improperly. Does not engage in activities other than official business during working hours. Does not engage in prohibited political activity. Does not report for work under the influence of alcohol or drugs.</p>	<p>As indicated by policies (specifically #1017, #3065, #3102, #3104, #3251, #3252 and HIPPA guidelines)</p>		<p><input type="checkbox"/> Did Not Meet <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Met</p>

Section 5: Overall Ratings

Overall Rating for Job & Individual Responsibilities

- Did Not Meet Expectations*
- Met Expectations
- Exceeded Expectations

Overall Rating for Terms & Conditions

- Did Not Meet Expectations*
- Needs Improvement
- Met Expectations

Section 6: Increase Recommendation

- NOT Eligible for Performance-Based Increase*
- Eligible for Performance-Based Increase

Section 7: Employment Status

- Working Test/Permanent Status Approved
- Not Applicable

* Note: Any employee rated in Section 5 as Did Not Meet Expectations is ineligible for a Performance-Based Increase

Section 8: Evaluation Signatures

Employee Signature and Comments

I have reviewed the contents of this form with my supervisor and have been advised of my ratings and employment status or increase eligibility status. I have made any comments I wish in this section. My signature does not necessarily indicate agreement.

_____ Date

_____ Employee Signature

Agency Official to whom request for review of the contents of this form should be submitted. (SPB Rule PAR 13.305)

Supervisor/Manager Signatures and Comments

This rating reflects my evaluation of the employee's performance. I have discussed this evaluation with the employee.

_____ Date

_____ Evaluating Supervisor Signature

Reviewing Manager Comments (if any):

_____ Date

_____ Reviewing Manager Signature

_____ Date

_____ Appointing Authority Signature (optional)

Section 9: Employee Development Plan

Instructions: List developmental goals or areas for improvement that will be addressed by on-the-job development assignments and/or by formalized training experiences. Indicate actions to be taken by supervisor and/or employee and specify the time frame for their completion. At the end of the performance period, describe any progress the employee has made in meeting development or improvement goals.

Developmental Goals/Areas for Improvement (Employee's and Supervisor's Input)	Planned Development/Training Activities (Agreed Upon by Employee and Supervisor)	Actual Progress

Name	Employee ID.	Hire/Promotion Date	
Class/Job Title	Position No.	Review Date	
Agency	Work Unit	Review Period from _____ to _____	
Statewide Responsibilities		NI	M
1. Teamwork		[]	[]
2. Customer Service		[]	[]
3. Organizational Commitment		[]	[]
Terms and Conditions		NI	M
1. Works When Scheduled		[]	[]
2. Requests and Uses Leave Appropriately		[]	[]
3. Dresses Appropriately		[]	[]
4. Observes Health, Safety and Sanitation Policies		[]	[]
5. Follows All Other Rules and Policies		[]	[]
Job and Individual Responsibilities (Give 4-5 word identifier)		NI	M
1.		[]	[]
2.		[]	[]
3.		[]	[]
4.		[]	[]
5.		[]	[]
6.		[]	[]
Recognition/Comments			
Performance, Terms and Conditions Improvements Needed			
Developmental Goals			
I have discussed the contents of this form with my supervisor and have been advised of my performance status relative to the responsibilities/terms and conditions stated on my performance plan.		I have discussed the progress of this employee relative to the responsibilities/terms and conditions stated in the employee's performance plan.	
_____ Employee's Signature		_____ Supervisor's Signature	
_____ Date		_____ Date	
		Permanent Status Approved []	
		_____ Reviewing Managers Signature	
		_____ Date	