

# VILLAGE OF SHOREWOOD – EMPLOYEE EVALUATION FORM



Name of Employee:

Name of Supervisor:

Anniversary Date:

Appraisal Year: 2019

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## Summary

Please complete the following sections for all regular full-time and part-time Village employees. Employees should first have the opportunity to complete their self-evaluation. Supervisors must complete each of the following sections and must provide comments based on their own observations and feedback. Evaluations should be completed by employee's anniversary date. Once signed by the employee and supervisor, please provide a signed copy to the Village Manager's Office for employee's personnel file. If the employee is having a 5-year (5, 10, 15, 20, etc.) incremental anniversary, supervisor must complete recognition pay form, as well.

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**Areas of Distinction.** Please identify the areas in which the employee is performing well. If possible, document specific instances when the employee demonstrated areas of excellence.

Comments:

**Areas of Improvement.** Please identify the areas on which the employee needs to grow or has room for further development. If possible, document specific instances to further explain these growth areas.

Comments:

**Employee:**

**Appraisal Year:** 2019

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**Goals for the Next Year.** Please indicate goals and initiatives the employee should work on for the next 12 months. Some of these goals and initiatives should concentrate on strategies the employee can perform to further develop their growth areas.

**Comments:**

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**Overall Evaluation.** Please identify if the employee is meeting expectations or needs improvement. Employees who receive meeting expectation ratings for five consecutive years will be eligible to receive recognition pay as outlined in the HR manual.

Meets Expectations

Needs Improvement

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**Employee and Supervisor Signatures.** I have read this appraisal and discussed its contents with my manager. My signature indicates that I am aware of the contents and the information has been shared with me.

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Supervisor Signature**

\_\_\_\_\_  
**Date**