



# Moulton Parish Council

## ANNUAL STAFF APPRAISAL FORM

NAME OF EMPLOYEE	
POST HELD	
DATE OF APPOINTMENT	
DATE OF ANNUAL REVIEW	

Purpose of Job	
Brief description of duties	
Key objectives & Targets from last appraisal	

### DETAILED ASSESSMENT OF PERFORMANCE OF DUTIES

- Markings
- A Well above the performance expected
  - B Consistently above the acceptable standard of the grade
  - C Generally, achieves the acceptable standard of the grade. Meets all the requirements of the job
  - D Not quite up to an acceptable standard, shows some general weaknesses
  - E Consistently below the acceptable standard
  - F Performance well below the expected level

1	<b>Knowledge of Duties</b>	A	B	C	D	E	F
(Comments here)							

2	<b>Quality of Work</b>	A	B	C	D	E	F
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3	<b>Quantity of Work</b>	A	B	C	D	E	F
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4	<b>Relations With Others</b>	A	B	C	D	E	F
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5	<b>Communication Skills</b>	A	B	C	D	E	F
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6	<b>Manual/Numeric/Operational skills</b>	A	B	C	D	E	F
(where applicable)							

7	<b>Supervision/Oversight of Staff</b>	A	B	C	D	E	F
(where applicable)							

<b>Strengths:</b>
<b>Weaknesses:</b>
<b>ATTENDANCE</b> and any specific factors affecting overall performance

<b>Training Needs and Qualifications</b>	
<b>Identified by employee:</b>	
<b>Identified by employer:</b>	

**OVERALL ASSESSMENT** (*tick*):

Exceeded performance	
Average performance	
Under performance	

Key Objectives & Targets for coming year (set by employer)	1)
	2)
Key Objectives & Targets for coming year (set by employee)	1)
	2)

Appraisal performed by: .....

Signature of Appraising Manager:.....

Date:.....

ADDITIONAL COMMENTS	
Signature of Countersigning Manager (if any)	
Date:	

**NOTES OF COUNSELLING INTERVIEW (including appraisee's responses)**

Interests and career aspirations

Comments (include here any out of line potential)

**ACTION PLAN**  
Including action to be taken to improve performance on current job and specific development and training action by:

1. the appraisee	target date
2. the Appraising Manager	target date
3. external sources	target date

Appraisee's signature – I have been offered the facility to see this report and I agree that the above is an accurate record of the views exchanged in the counselling interview

Signature	
Signature of Appraising Manager	