

STATE OF NORTH CAROLINA
JUDICIAL BRANCH OF GOVERNMENT
Human Resources Division

SUPERVISORY
EMPLOYEE PERFORMANCE
APPRAISAL SUMMARY

INSTRUCTIONS: Finalize the annual Employee Performance Appraisal form. Then complete and forward this Performance Appraisal form to the Administrative Office of the Courts, Human Resources Division, Courier Box 56-10-50, Raleigh, NC, OR, if courier is not available, mail to P. O. Box 2448, Raleigh, NC 27602.

Name Of Employee (First, MI, Last)		Social Security No. (Last Four Digits)	Employee Classification Title	Planning Date
Name Of Evaluating Supervisor		Name Of Hiring Authority		Mid-Year Evaluation Date
Position Location:	Division	District No.	County	Annual Evaluation Date

SECTION 1A KEY JOB RESPONSIBILITIES	PERCENT VALUE	RATING				
		<input type="checkbox"/> Exceptional	<input type="checkbox"/> Exceeds	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Needs Improvement	<input type="checkbox"/> Unsatisfactory
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 1A RATING		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 1B MANAGERIAL VALUES	RATING				
	<input type="checkbox"/> Exceptional	<input type="checkbox"/> Exceeds	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Needs Improvement	<input type="checkbox"/> Unsatisfactory
Managing Mutual Respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managing Employee Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 1B RATING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMBINED 1A AND 1B RATING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 2 PERFORMANCE VALUES	RATING				
	<input type="checkbox"/> Exceptional	<input type="checkbox"/> Exceeds	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Needs Improvement	<input type="checkbox"/> Unsatisfactory
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continuous Improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mutual Respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 2 RATING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Employee Annual Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EXTENSION OF RATING PERIOD: Please explain the reason for extending the rating period.

CERTIFICATION

I, the undersigned employee, certify that this performance appraisal has been discussed with me and I have been given the opportunity to comment in writing. I understand that my signature does not constitute agreement.

Date Of Annual Evaluation Review	Signature Of Employee
Date Of Annual Evaluation Review	Signature Of Evaluating Supervisor
Date Of Annual Evaluation Review	Signature Of Hiring Authority