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 Em	Soci	Social Security No. (Last Four Digits) Employee Classification Title							Planning Date												
Name Of Fue	Man	Name Of Living Authority									Mid	Mid-Year Evaluation Date									
Name Of Evaluating Supervisor								Name Of Hiring Authority										- year E	=vaiuatioi	i Date	
Position Location:	Division District No.						Cou	County									Ann	Annual Evaluation Date			
SECTION 1A KEY JOB RESPONSIBILITIES RESPONSIBILITIES											RAT	ING									
1			Exceptional Ex			xceeds			Meets	Expectati	ons Needs Impro			rovemen	t [Un	satisfac	tory			
2			Exception	Ex	Exceeds			Meets	Expectati	ons Needs Improver				rovemen							
3 [Exception	nal	Ex	ceeds			Meets	Expectati					rovemen	ment Unsatisfactory					
4			Exception	nal [Exc	ceeds			Meets Expectations			ns Needs Improvemen				t Unsatisfactory					
5			Exception	Ex	Exceeds			Meets Expectations			Needs Improvement				Unsatisfactory						
6	6			Exceptional [xceeds			Meets Expectations			Needs Improvement				t [Unsatisfactory			
7	7		Exceptional E			ceeds			Meets Expectations				Needs Improvement				Unsatisfactory				
SECTION 1A RATING			Exception	ceed	ls		Meets	Meets Expectations				Needs Improvement				Unsatisfactory					
SECTION 1B MANAGERIAL VALUES																					
Managing Mutual Respect			Exceptional			Exceeds				Meets Exp	pectations Needs Im				Improven	ovement Unsatisfactory					
Managing Employee Performance			Exceptional			Exceeds				Meets Exp	pectation	ectations Needs Improver				nent Unsatisfactory					
Leadership			Exceptional			Exceeds			Meets Expectations				Needs Improvement				ent Unsatisfactory				
SECTION 1B RATING			Exce	eptional		E	xceed			Meets Exp	pectation	าร	<u> </u>	Needs I	Improven	nent	□ L	Jnsatisfa	ctory		
COMBINED 1A AND 1B RATING			Exce	eptional		E	xceeds	3		Meets Exp	pectation	าร	<u> </u>	Needs I	Improven	nent	□ L	Jnsatisfa	ctory		
SECTION 2 PERFORMANCE VALUES								RATING													
Communication			Exce	eptional		E	xceeds	6		Meets Exp	pectation	ns [1	Needs I	Improven	nent	<u></u> υ	Jnsatisfa	actory		
Teamwork			Exce	eptional		E	xceeds	6		Meets Exp	pectation	าร	<u> </u>	Needs I	Improven	nent		Unsatisf	actory		
Dependability			Exce	eptional] E	xceeds	3		Meets Exp	pectation	าร	1	Needs	Improven	nent		Unsatisf	actory		
Customer Service			Exce	eptional		E	xceeds	3		Meets Exp	pectation	าร	I	Needs I	Improven	nent		Unsatisf	actory		
Continuous Improvement			Exce	eptional		E	xceeds	3		Meets Exp	pectation	าร	1	Needs I	Improven	nent		Unsatisf	actory		
Judgment			Exceptional [Exceeds			Meets Expecta			tations Needs Improvem					ent Unsatisfactory				
Mutual Respect			Exce	eptional		E	xceeds	3		Meets Exp	pectation	าร		Needs I	Improven	nent		Unsatisf	actory		
SECTION 2 RATING			Exce	eptional		E	xceeds	3		Meets Exp	pectation	ns [1	Needs I	Improven	nent		Unsatisf	actory		
Overall Employee Annual Rating			Exce	eptional		E	xceeds	3		Meets Exp	pectation	ns [1	Needs I	Improven	nent		Unsatisf	actory		
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.													nity to								
Date Of Annual Evaluation Review									S	Signatu	re Of Emplo	yee									
Date Of Annual Evaluation Review						Signature Of Evaluating Supervisor															
Date Of Annual Evaluation Review										Signature Of Hiring Authority											