



The Evergreen State College  
Human Resource Services

**ASSESSMENT PHASE**  
**Performance Development Plan Form**  
(To be completed by the end of the performance period)

Type of Evaluation (Should match the Planning Phase PDP form) <input type="checkbox"/> Annual <input type="checkbox"/> Probationary <input type="checkbox"/> Trial Service <input type="checkbox"/> Transition Review		
Employee Last Name	Employee First Name	Employee A #
Position Number	Performance Period (Including Planning and Assessment Phases) From:    /    /    To:    /    /	Position Description Updated <input type="checkbox"/> Yes <input type="checkbox"/> No
Position Title		
Division	Unit	Supervisor's Name

**SECTION 1: Performance Assessment**

**Part 1: Interim Reviews (Optional)**

As an option, Interim Reviews can be used to document interim performance feedback and the updating of expectations for the performance period.

**Part 2: Performance Feedback**

Provide a narrative assessment of the employee's performance in relation to the content of the Planning Phase PDP for previously completed. The feedback should focus on the degree to which the expected Key Results, Skills, Abilities and Goals (from the Planning Phase PDP) were met for the performance period. Other relevant information may be included as well such as: special achievements, comments about strong performance under unanticipated difficult work place circumstances, etc. Content in the Assessment Phase PDP should be based on observed or verified performance.

**A) Key Results Assessment**

To what degree did the employee accomplish the expected results and how well were they done?

**B) Key Skills and Abilities Assessment**

How well (or how frequently) did the employee demonstrate the skills and abilities expected?

**C) Training and Development Goals / Opportunities**

What training was completed? What development goals were achieved?

**D) Other Performance Feedback**

Other relevant information may be included such as: special achievements, comments about strong performance, etc.

**SECTION 2: Signatures, Comments and Filing**

**Part 1: Signatures and Comments**

**Supervisor Section**

By signing below, I acknowledge that this Assessment Phase PDP is based on my best judgment.

Supervisor's Signature

Date

**Employee Section**

By signing below, I acknowledge that this Assessment Phase PDP has been discussed with me.

Employee's Signature

Date

Employee may attach comments or write them in this section.

**Reviewer Section**

By signing below, I acknowledge that I have reviewed the Assessment Phase PDP and that the PDP process has been properly followed.

Reviewer's Signature

Date

Reviewer may attach comments or write them in this section.

**Part 2: Filing**

The supervisor retains one copy of the Assessment Phase PDP form and provides one copy to the employee and one copy to the Reviewer. The signed original Assessment Phase PDP form is reviewed by Human Resource Services and placed in the employee's official personnel file.

A new performance cycle begins at this point and a new Planning Phase PDP form should be completed.