|  |  |
| --- | --- |
| Name:       | P/S Identification #:       |
| Job Title:       | Position #:      |
| Division:       | Department:       | Date:       |

**Section 2 – Objectives for this Performance Cycle**

*Updated annually, this section outlines the employee’s key goals and/or objectives for the performance cycle. These are not the same as competencies and responsibilities, which are addressed in Section 1. They are either individual or unit performance objectives. Objectives should be agreed upon at the beginning of the performance cycle with strong consideration given to those objectives that directly support points of divisional and/or university emphasis. Then, at the end of the performance cycle, as part of the performance evaluation, the employee and supervisor will discuss each objective, indicate the objective’s status and add comments as necessary. Objectives are flexible and may be changed during the performance cycle when the employee and supervisor agree change is appropriate. They can also be carried forward from one performance cycle to the next. Objectives/accomplishments that arise from unexpected opportunities during the performance cycle may also be noted. Supervisors should consider accomplishment of objectives when evaluating the employee’s overall performance for the performance cycle.*

Performance Cycle: \_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Objective** *(to be agreed upon by the employee and supervisor at the* ***beginning*** *of the performance cycle)* | **Status** | **Notes/Comments** |
| 1: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 2: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 3: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 4: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 5: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 6: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 7: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |
| 8: | \_\_ Complete\_\_ Ongoing\_\_ Incomplete\_\_ Other |  |

Employee Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Go to [Section 3A](http://www.jmu.edu/humanresources/_files/apeval-section3A.doc)