

THE ACCOUNTABILITY AND TALENT IMPROVEMENT PROCESS

RENDER AN ACCOUNT

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|------------|------------------|
| Name: | Employee number: |
| Job Title: | Supervisor: |

Complete the employee section below, and then submit this form to your supervisor. Your supervisor will then complete his or her section and schedule a time to meet and review this section with you. In the space provided, summarize your key contributions, areas where you improved, and any missed opportunities. Then mark the appropriate rating on the results scale below.

EMPLOYEE SUMMARY AND RATING

Summarize and rate your results and behavior.

MANAGER SUMMARY AND RATING

Summarize and rate the employee's results and behavior.

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| | |
| <p>Rate your overall results by placing an X in the appropriate box</p> <p> <input type="checkbox"/> ACCEPTABLE <input type="checkbox"/> OPPORTUNITY TO IMPROVE <input type="checkbox"/> EXCEPTIONAL ACHIEVEMENT </p> | <p>Rate the employee's overall results by placing an X in the appropriate box</p> <p> <input type="checkbox"/> ACCEPTABLE <input type="checkbox"/> OPPORTUNITY TO IMPROVE <input type="checkbox"/> EXCEPTIONAL ACHIEVEMENT </p> |

GOALS/PRIORITIES FOR COMING YEAR

Summarize the job functions/personal improvement goals that the employee will strive to achieve in the next rating period.

DEVELOPMENT PLAN

Summarize the steps that will be taken and the resources to be made available for the employee to accomplish the improvement goals for the coming year.

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|--|--|

Employee

Date

Supervisor

Date

Code of Honor, Conflict of Interest and Time Commitment, FERPA Statement

I have reviewed the Code of Honor and I reaffirm my commitment to abide by its standards. I understand that observance to the Code of Honor and eligibility of a temple recommend are specific conditions of employment.

I have reviewed the Conflict of Interest and Conflict of Time Commitment policies with my supervisor, and have no outside interest which needs to be disclosed.

Employee Initial: _____

Attached is a Conflict of Interest form signed and approved by the employee and supervisor disclosing a Conflict of Interest and a Conflict of Time Commitment. [Go to the following link to obtain the form <https://hr.byuh.edu/sites/hr.byuh.edu/files/Conflict%20of%20Interest%20%26%20Time%20Form.pdf>.]

Employee Initial: _____

I have reviewed the University FERPA requirements and agree to comply with the spirit and intent of the law.

Employee Initial: _____

Employee Acknowledgement

I have reviewed and understand the above information and discussed the contents with my manager. My signature means that I have been advised of my performance status and does not necessarily imply that I agree with the evaluation.

Employee Signature / Date

Reviewer Signature / Date