

# PERFORMANCE REVIEW FORM

**ATTACHMENT 12.**

**WE  
LIFE WITHOUT BARRIERS  
VE**

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Region:** \_\_\_\_\_

**Review Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Review Manager:** \_\_\_\_\_

## Guidelines

- Employee and Manager to complete their appropriate section before the scheduled meeting.
- During the review meeting, the Manager is to discuss each question with the employee and give them an opportunity to elaborate.
- Where there are performance issues, please contact HR for advice before proceeding
- Decide together on goals and development for the employee to be followed up throughout supervision meetings.
- Both Manager and Employee to make any final comments and sign off on the agreed actions
- A copy of the signed review is to be given to the Employee, Manager and relevant HR Team.

## Employee to Complete

In your opinion, what are the main duties and responsibilities of your role?

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What has been your biggest achievement since commencing in this position?

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Are there any areas you find challenging in your role, and/or is there anything preventing you from undertaking the duties of your role?

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What areas would you like further assistance with in your role? Going forward, what training and development you would be interested in?

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## Manager to Complete

Manager to briefly describe the top 4 KRA's	Exceeds Expectati	Meets Expectati	Needs Develop	Comments
KRA 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
KRA 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
KRA 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
KRA 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Team Work</b> Willingly cooperates with team members, Tolerant of others, Works well within the team, Takes responsibility within the team, Fair and equitable in all dealings, Communicates clearly, Demonstrates effective listening skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Attitude towards work</b> (Including reliability, punctuality, professionalism, cooperative, enthusiastic etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<p><b>Delivery Quality Service</b> (Understanding of clients needs, carries out tasks in a timely manner and accepts directions etc)</p>	□	□	□	
<p><b>Demonstrating Respect for Cultural Diversity</b> (Appropriate conduct and sensitivity, makes efforts to understand cultural diversity of clients, appropriate interactions etc)</p>	□	□	□	

## Overall Comments

Employee Comments (opportunity to comment on achievements, challenges, concerns or anything you feel relevant that needs to be documented)

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Manager Comments (please comment on employees overall performance, achievements or any additional projects for the last 3 months)

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## Probationary Performance Review Sign Off

I recommend confirmation of the employee's permanent status

I do not recommend the employee continue with Life Without Barriers

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Copies to: Employee, Manager and Personnel File

Please send a completed copy through to your HR Team for an end of probation period confirmation letter to be processed.

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DOCUMENT NAME	Performance Review Form		
DOCUMENT TYPE	Form		
SERVICE SECTOR/S	All Service Sectors		
VERSION	V2.0		
APPROVAL DATE	01/12/2011	REVIEW FREQUENCY	3
APPROVED BY	Bruce Mulligan The signatory (lead Executive) is accountable to implement, maintain and monitor appropriate systems to achieve the objectives of this document.		
BUSINESS PORTFOLIO	Human Resources		
CONTACT FOR QUERIES	Jess Powell		
RELATED TOPIC/S	Recruitment and Retention		