



PERSONNEL ACTION OF PROFESSIONAL EMPLOYEE

- INSTRUCTIONS:
- 1) Part A to be completed by the Professional **Employee**.
 - 2) Part B to be completed by the professional employee's Immediate Supervisor and signed and dated by both the employee and the immediate supervisor.
 - 3) Part C to be completed by the appropriate Administrative Officer.

PART A: To be completed by the Professional Employee **prior** to the preliminary meeting with the immediate supervisor.

1. NAME: _____

2. TITLE: BUDGET _____
LOCAL (if different) _____

3. DEPARTMENT/AREA: _____

4. IMMEDIATE SUPERVISOR: _____

5. PROFESSIONAL OBLIGATION: (check one)

Calendar Year College Year: Period of No Obligation _____

6. DATE OF APPOINTMENT TO CAMPUS: _____

7. NUMBER OF YEARS OF APPLICABLE SERVICE THROUGH THE END OF THE CURRENT CONTRACT:

a) At SUNY Potsdam _____ b) Credited Prior Service _____ c) Total Service _____

8. DATE OF THIS EVALUATION: _____

9. PURPOSE OF THIS EVALUATION (check all that apply):

Reappointment Decision Permanent Appointment Decision

Annual Evaluation Promotion and/or Salary Increase

Leave (specify type) _____

10. Give a personal evaluation of your performance based upon your Performance Program.

11. Describe the most significant contributions you have made to your work since your last evaluation.

12. Since your last evaluation, give a) educational achievements (workshops, conferences, courses, honors, awards, etc.); b) service on college and university committees; c) professional organizations (memberships, presentations, offices held, etc.); d) research, publications, and other creative work.

NOTE: a) For reappointment, permanent appointment and promotion, an updated vita and the current performance program must be attached.
b) For a leave request, a statement discussing the purpose and objective of the leave; benefits to you, the department and the college if the leave is granted and how the work of the leave will be evaluated in terms of the objectives listed.

Signature of Professional Employee

Date

PART B: Evaluation by the Professional Employee's Immediate Supervisor

- NOTE: 1) The evaluation must be completed in accordance with the employee's **present** Performance Program.
2) A copy of the **new** Performance Program, signed by both the employee and the immediate supervisor, must be attached to this evaluation.
3) A **summary** of the information given by the secondary sources (if used) must be given.
4) If the employee is within at least three years of eligibility to receive permanent appointment, supervisors are reminded to indicate suggested areas for improvement which could be considered pertinent to future recommendations affecting such an appointment.
5) The **original** written, dated and signed evaluation is to be forwarded for inclusion in the employee's personnel file, a copy of which shall be given to the employee, the immediate supervisor, and evaluator's supervisor.
6) **With respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared.**

13. FINAL EVALUATION-NARRATIVE SUMMARY: (If additional space is required, please attach separate sheet(s).)

14. SUMMARY CHARACTERIZATION OF EMPLOYEE'S PERFORMANCE (check one):

Satisfactory

Unsatisfactory

PART C: To be completed by the appropriate administrative officers.

- 1. a. Recommendation by Immediate Supervisor -- **with respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared. Must indicate number of years for a reappointment.**

Signature of Immediate Supervisor _____
Date

- 1. b. Employee Evaluated Signature -- NOTE: employee may attach a supplemental statement regarding the immediate supervisor's evaluation if desired.

Signature of Employee Evaluated _____
Date

- 2. Recommendation by Director/Dean -- **with respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared. Must indicate number of years for a reappointment.**

Signature of Dean/Director _____
Date

- 3. Recommendation by Vice President/Provost -- **with respect to written recommendations pertaining to reappointment, a copy of the recommendation shall be sent to the employee at the time it is prepared. Must indicate number of years for a reappointment.**

Signature of Vice President/Provost _____
Date

NOTE: When the appraisal is in consideration for reappointment, permanent appointment, non-renewal, or promotion, the appraisal file shall be forwarded to the Office of Human Resources BEFORE the decision of the President is made in order that the professional employee being evaluated may have the opportunity to examine the appraisal file and file a statement in response to any item contained therein.

- 4. Decision of President

Signature of President _____
Date