**FORM P6:**

**ANNUAL APPRAISAL REPORT | Staff performance appraisal**

(GAO 3.9.1)

**CONFIDENTIAL**

#### PART 1: Personal information – to be completed by the officer being appraised.

#### (click on grey box to enter information)

|  |  |
| --- | --- |
| Ministry | Department: |  |
| Name: |  |
| Assessment period: | From:       To: |
| Post: |  |
| Date of appointment: |  |
| Current level/salary: | Level:       Salary: |
| Confirmation date: |  |
| Incremental month: |  |

1.1 List qualifications, workshops, courses, seminars and conferences attended during the 12 month review period only. (Insert more lines as required)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of program** | **From** | **To** | **Institute/Provider** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1.2 Provide a brief outline of the main activities and outcomes you have achieved during this assessment period: (**CLICK IN TEXT BOX TO START)**

**PART 2: Appraisal interview –**

**Must be completed by immediate Supervisor with the Officer**

2.1 Key to rating and points:

A – Outstanding (10) B – Very Good (8) C – Good (6)

D – Average (5) E – Fair (4) F – Unsatisfactory (2)

| **Aspects** | **A** | **B** | **C** | **D** | **E** | **F** | **Remarks** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Knowledge and application of work |  |  |  |  |  |  |  |
| Quality of work |  |  |  |  |  |  |  |
| Quantity or output of work |  |  |  |  |  |  |  |
| Communication and interpersonal skills |  |  |  |  |  |  |  |
| Initiative and judgment |  |  |  |  |  |  |  |
| Management of subordinate staff and/or working with others |  |  |  |  |  |  |  |
| Attendance/punctuality |  |  |  |  |  |  |  |
| Overall grading |  |  |  |  |  |  |  |

* 1. Provide a brief summary of performance on the key aspects listed above:
  2. Provide a brief summary of any performance issues faced during the assessment period:
  3. Discuss and agree on an action plan for the next 12 months:

**PART 3: Training and Career development:**

**Immediate supervisor must discuss and agree with the officer**

* 1. Discuss officers Strengths and areas for improvement

3.2 Provide details of any training and development needs aligned with current post (short term) and future career opportunities (long term):

Appraised Officer’s signature:

Immediate Supervisor’s name:       Signature:

Post:       Level:       Date:

**PART 4: Reviewing officer recommendation (Any other responsible officer at least one level above immediate supervisor)**

Overall Comments by reviewing officer:

**Recommendation for salary increment:**

Having considered this appraisal report, I recommend that this officer’s eligibility for a salary increment is –

□ Approved Current Salary $      New Increment/Salary: $      w.e.f

□ Not approved □ Not applicable/top of increment level □ Not Applicable/Probation

Comment:

Reviewing officer name:       Signature:

Post:       Level:      Date:

**Secretary to Government endorsement of salary increment:**

□ I endorse the recommendation for this officer’s salary increment and consequently approve that the increment be awarded.

□ I do not endorse the recommendation for this officer’s salary increment and consequently approve that the increment be withheld.

Comments:

Name of Secretary to Government:

Secretary to Government (signature):       Date: