

**Performance Review Circle Summary for:**

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Performance Review Circle Completed on:**

**COLA Raise effective (DOH):**

**Focus person Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Programs Coordinator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE TURN IN TO PAYROLL.**

# Round 1: Done Well:

# Round 2: Could do better: Please think about what you will say and write your notes here:

**Round 3: Exploration of Improvement Areas:**

**Round 4: Exploration of Improvement Plan:**

**Proposal with Consent:** Improvement Plan with terms and measurements:

|  |  |  |  |
| --- | --- | --- | --- |
| **Desired Result** | **Specific Goal** | **Measurement(s)** | **Term** |
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