**ENTRETIEN ANNUEL D’ÉVALUATION**

**PERSONALGESPRÄCH *CONFIDENTIAL***

**PERFORMANCE EVALUATION INTERVIEW**

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| **1. PERSONAL DETAILS** |
| ***Collaborator*** | Last, First names: |  | Activity: |  |
|  | Personal number(SAP ID): |  | Year and reference period: |  |
| ***Unit*** | Superior / Coach: |  | Date of last evaluation: |  |
|  | School /VP – Unit: |  | Last evaluation grade: |  |
|  | If multiple subordinations: |  | Change of superior:  |  |

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| **2. JOINT EVALUATION OF TASKS AND OBJECTIVES** |
| **N°** | **TASKS(CF. JOB DESCRIPTION AND OBJECTIVES)** | **GRADES (A++, A+, A, B, C)** | **COMMENTS AND / ORMEASURES FOR IMPROVING PERFORMANCE** |
|  |  | **EVAL. COACH** | **AUTO ÉVAL.** |  |
|       |       |       |       |       |
| **3. BILAN ET DEVELOPMENT OF SKILLS** |
| **AREA** | **COURSE OF ACTION (BY WHOM? WHEN? HOW? TRAINING)** |
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| **4. GLOBAL EVALUATION**  |
| **GLOBAL EVALUATION** |       |       |

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| **5. COLLABORATOR’S SATISFACTION AND COMMENTS, DEVELOPMENT** |
|       |
| DEGREE OF SATISFACTION | 1[ ]  | 2[ ]  | 3[ ]  | 4[ ]  | 5[ ]  | 6[ ]  | 7[ ]  | 8[ ]  | 9[ ]  | 10[ ]  |

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| **6. AGREED MEASURES** |
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| **7. POSSIBLE ADJUSTMENT OF JOB DESCRIPTION** |
|       | Deadline: |       | Person in charge: |       |

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| **8. DATES AND SIGNATURES** |
| *Collaborator:* |        | *Superior /Coach:* |        |
| Date: |       | Date: |       |
| *Collaborator’s signature only implies that she.he has been informed of the content of the evaluation. It does not imply her.his approval.* |
| *Commentaires éventuels :* |       | *Commentaires éventuels :* |       |