

**MINOT STATE UNIVERSITY-Dakota College at Bottineau  
PERFORMANCE DEVELOPMENT REVIEW**

<b>Employee's Name:</b>	<b>Evaluation Type:</b> <input type="checkbox"/> Probationary <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____
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<b>Position Title/Number:</b>
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<b>Supervisor's Name:</b>	<b>Review Date:</b>
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<b>Reporting Period Beginning Date:</b>	<b>Reporting Period End Date:</b>
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Position description has been reviewed and updated as necessary

Overall Rating of this performance review is:

- SATISFACTORY
- UNSATISFACTORY

**Select the position description duties/responsibilities to be reviewed:**

<b>Duty/Responsibility # ( ):</b>
<b>Review of Previous Goals:</b>
<b>Future Goals:</b>
<b>Other Comments:</b>

**Employee Name:** \_\_\_\_\_ **Review Date:** \_\_\_\_\_

<b>Duty/Responsibility # ( ):</b>
<b>Review of Previous Goals:</b>
<b>Future Goals:</b>
<b>Other Comments:</b>

<b>Duty/Responsibility # ( ):</b>
<b>Review of Previous Goals:</b>
<b>Future Goals:</b>
<b>Other Comments:</b>

**Employee Name:** \_\_\_\_\_ **Review Date:** \_\_\_\_\_

**Supervisor's General Comments:**

**Employee's Comments:**

**Employee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

