



Arkansas Parole Board
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ADMINISTRATIVE DIRECTIVE: 07-01 EMPLOYEE PERFORMANCE EVALUATION

TO: PAROLE BOARD EMPLOYEES

FROM: LEROY BROWNLEE, CHAIRMAN

APPROVED: SIGNATURE ON FILE

Effective: October 1, 2007

- I. APPLICABILITY:** This policy applies to Arkansas Parole Board employees.
- II. POLICY.** It is APB policy to administer an employee performance evaluation system, which measures performance and encourages communication between raters and the employees being rated. The employee performance evaluation system will operate within legal parameters and guideline published by the Office of Personnel Management (OPM). Nothing contained in APB policies, handbooks, application, or other documents, or the granting of any interview or the placement in a probationary status or any other administrative act creates, constitutes, or implies a contract between an individual and APB for either employment for any specific period of time and employment can be terminated with or without cause, and with or without notice, at any time at the option of either the APB or the employee pursuant to the at-will employment doctrine
- III. DEFINITIONS**
 - A. Above Average.** On a regular basis, performance is characterized by high quality and quantity of work that exceeds most position requirements, key objectives, and management expectations. Employee demonstrates outstanding skills and abilities, and assignments are accomplished in a highly effective manner with limited guidance and direction.
 - B. Board Chairman.** The rating official for the Chairman is the Governor. The Board Chairman Performance Evaluation (AD 07-01 Form 3 EXE) will be completed for the position.
 - C. Exceeds Standards.** Performance consistently exceeds position requirements and management expectations. Resourcefulness and depth of knowledge are of the highest quality. Assignments are accomplished in an exceptional manner with minimal direction and are characterized by outstanding achievements seldom accomplished with the agency.

- D. **Functional Job Description and Tasks.** A description of the specific responsibilities, duties, and significant tasks assigned to an employee.
- E. **Merit Increase.** An increase above the Cost-of-Living-Adjustment (COLA) approved by the state for employees who have continuous employment with the state in a regular full-time position for 12 months or has completed 2,080 hours as a part-time employee in a regular salary position and whose performance is satisfactory or above as described in this policy.
- F. **Needs Improvement.** Performance does not consistently meet management expectations. Employee requires more than normal guidance and direction. Improvement and/or development are necessary if the rater elects to continue employment with the incumbent.
- G. **Performance Evaluation (PE).** A formal assessment of an employee's job performance.
- H. **Performance Factors.** Elements on which the employee will be rated.
- I. **Rater.** The supervisor responsible for developing performance/appraisal plans functional job descriptions/tasks and evaluating employee job performance.
- J. **Rating Period.** The period subject to work performance review.
- K. **Reviewing Official.** The rater's supervisor or a higher-level supervisor designated to review performance evaluation plans and ratings.
- L. **Satisfactory.** Performance meets all or most and may occasionally exceed work objectives and management expectations. Employee demonstrates good knowledge of job duties and assignments are accomplished effectively with normal supervisory guidance.
- M. **Senior Management.** The Vice Chairman, Commissioners and Hearing Examiner in unclassified positions report directly to the Board Chairman. The rating officials for Senior Management utilize the Performance Evaluation form (AD 07-01, Form 3 SRM.)
- N. **Task.** A well-defined component of a job that indicates what is to be done.
- O. **Unsatisfactory.** Performance does not consistently meet management expectations. Requires more than normal guidance and direction. Improvement and/or development are necessary *if the rater elects* to continue employment with the incumbent.

IV. GUIDELINES.

- A. **Job tasks, Duties and Responsibilities.** OPM develops generic specifications for each job classification, which include general examples of duties, which might be performed. Supervisors (raters) develop functional job descriptions with tasks to tailor the class specifications to the specific APB functional activity. The functional job description/tasks (your primary tasks, duties and responsibilities) and performance factors are meant to guide the employee during the rating period and are not intended to address every minute of the workday. Employees are responsible for contacting their supervisors for clarification if needed. Assigned functional job tasks, duties and responsibilities may not be contested or refused.
- B. **Rating Employees.** A rater must have the ability to determine the quality and quantity of employee work; complete the Performance Evaluation training conducted or approved by the OPM within 6 months of assuming supervisory duties; be familiar with the duty areas to be performed by the employees to be evaluated; and be in a position to periodically observe, review and document employee job performance. An annual performance appraisal must be completed on each employee. Throughout the evaluation period, the rater should monitor performance and provide appropriate feedback to the employee. It is important that employees have the opportunity to provide input into the performance review process. Prior to the end of the rating period and before the performance review is conducted, the employee may provide performance input which will be considered by the rater along with employee achievements. Performance evaluation ratings require prior approval and sign-off of the reviewing official before discussion with the employee. The rater will discuss the approved P.E. with the employee, secure the employee's signature, and forward all original documents to the Human Resources Section.
- C. **Performance and Merit Levels.** Performance levels are used to indicate the level of performance an employee has achieved on each performance factor. The five performance levels are Exceeds Standards, Highly Satisfactory, Satisfactory, Needs Improvement, and Unsatisfactory. Performance levels and performance factors are described in detail on the performance evaluation form. An employee shall be eligible for a merit increase of 1 ½ % for "satisfactory", 3% for "above average", and 4 ½% for "exceeds standards" job performance; meeting the annual training requirements, and complying with the Code of Ethics and Rules of Conduct. If the employee is a supervisor, he/she must have conducted the P.E.'s on the employees he/she supervises within the timeframe established. Merit increases are dependent upon meeting all established criteria and the availability of funds.
- D. **Unsatisfactory Performance.** A supervisor may terminate or place an employee on probation for one or more categorical ratings of less than satisfactory performance in a critical or overall rating performance factor(s). Appropriate documentation should be available to support this assessment. Generally, supervisors should counsel employees during

a probationary period and may impose or extend it up to 90 calendar days for less than satisfactory job performance. The Board Chairman may approve one additional 90 day period of probation for employees showing marked improvement but who are still not performing satisfactorily. A supervisor does not have to wait until the probationary period has been completed to end employment.

E. Merit Increase Eligibility Dates and Performance Evaluation Schedule.

1. October 1 of each year is the eligibility date for merit increase for all employees who have been continuously employed with the state since October 1, 2006. The latest hire date will be the eligibility date for merit increase for an employee hired after October 1, 2006. All evaluations must be completed within a period that provides the non-probationary employee time to appeal the evaluation if necessary. All performance evaluation documents must be completed and submitted to Fiscal Agency Manager 30 days prior to the eligibility date for merit increase. The rating period is six to eleven months beginning on the employee's increase eligibility date.
2. Merit increase payments shall be added to the employee's base salary except, if the merit increase awarded will cause the employee's base salary to exceed Pay Level IV of the assigned pay grade or the line item maximum annual salary rate of the position. The amount above Pay level IV or the maximum annual salary rate of the position shall not be construed as exceeding the maximum salary and shall be paid to the employee as a lump-sum payment, and shall be considered as salary for the purpose of retirement eligibility. Raters who fail to complete an annual evaluation of employees under their administrative control shall not be eligible for merit payments themselves. Payment of merit increases is contingent upon the availability of funds and satisfaction of the following requirements:
 - a. The employee has not laterally transferred, been promoted, involuntary or voluntarily demoted within the last six months; **AND** has been in continuous employment with the state in either a classified or unclassified regular full-time position for 12 months since October 1, 2006 (*this employee has an increase eligibility date of October 1 throughout the remainder of their continuous state employment*); **OR** the employee is a rehire or employee who has not accumulated twelve months of continuous state employment by October 1, 2007 (*this employee's latest hire date in state employment will be their merit increase eligibility date for each year of continuous state employment*); **OR** the employee is a part-time employee in a regular salaried position that completes 2080 hours (*the date the hours are completed will be the increase eligibility date, will be re-established each time the 2080 hours are reached*); **OR** the employee is on extended leave (such as military or extended military, and catastrophic leave or leave without pay) and has accumulated at least six months of actual work experience (*after the merit pay cycle in which the employee was on extended leave is completed, this employee's merit increase eligibility date reverts to October 1 or the latest hire date, whichever is appropriate*); **AND**
 - b. The employee met the annual training requirements; **AND**
 - c. The employee has not been disciplined for a violation of the Code of Ethics and Rules of Conduct; **AND**
 - d. The employee has a PE score equivalent of "satisfactory" or above; and, if applicable, **AND, as appropriate,**

- e. The employee is a supervisor who has completed all required PE reviews, and submitted them on the employees he/she supervises to Fiscal Agency Manager in a timely manner.
3. Employees who transfer laterally, are promoted, or are demoted, either voluntarily or involuntarily, will be eligible to receive an annual merit increase on their merit increase date if (1) they have completed six months of service in their new position and (2) all of the conditions as outlined in the above paragraph are met.

V. PROCEDURES.

- A. **Employee.** Employees should maintain records of job duties performed, recognition, training, and other accomplishments, and provide desired input using Form 2, “Self-Evaluation” to the supervisor at least 45 days prior to the end of their rating periods.
- B. **Rater.** Raters (supervisors) manage the performance evaluation process as follows:
1. **Functional Job Description and Tasks.** Supervisors must develop and review the Functional Job Description and Tasks annually (revising as appropriate) for each subordinate, using Form 1, “Functional Job Description and Tasks.” Supervisors should consider employee questions, concerns or recommendations regarding the job description; however, the supervisor has the final authority to prescribe job duties and tasks. Employee and supervisor signatures are affixed to indicate understanding. The supervisor must provide a signed copy to the employee at the beginning of each rating period.
 2. **Performance Evaluation.** Supervisors must provide the employee a copy of the appropriate “Performance Evaluation” and the Functional Job Description, at the beginning of the rating period.
 3. **During the rating period.** Supervisors must monitor employee performance. If the rater determines an employee’s performance has fallen below satisfactory in one or more factors, he or she must counsel the employee and, if warranted, place him/her on performance probation and document the action. The rater must provide constructive feedback and encourage the employee to perform his/her best. When substantial changes in the job occur, the supervisor must promptly update the Functional Job Description /Tasks, obtain supervisory review and approval, and provide a signed copy to the employee.
 4. **End of the rating period.** The rater must perform the following:
 - a Schedule the review, obtain, and consider any employee performance input provided in the Employee PE Input (Form 2).
 - b Accurately rate the employee’s performance on the Performance Evaluation form, considering any employee’s performance input, contents of the supervisor’s file, and knowledge of the employee’s performance. Scores above or below satisfactory must be justified in writing.

- c Prior to any performance review with the employee, forward the completed Performance Evaluation with the Employee PE Input, if submitted, to the reviewing official for comment and signature.
 - d Make appropriate adjustments based on reviewing official comments.
 - e Review the Performance Evaluation with the employee and obtain his/her signature and any comments. Also, have the employee re-sign the agencies code of ethics and rules of conduct acknowledgement document.
 - f Forward the Functional Job Description and Tasks, Performance Evaluation, and Employee Self-Evaluation to Agency Fiscal Manager according to the schedule above, using the “Performance Evaluation Transmittal Letter.”
 - g An Employee who receives an “unsatisfactory” or “needs improvement” rating on any performance factor of the PE is not eligible to receive a merit pay increase.
5. **Processing Delays.** As soon as a supervisor realizes that an appeal will delay submission beyond the employee’s increase eligibility date, he/she must notify the Fiscal Agency Manager. Supervisors who fail to complete a performance evaluation of an employee within the required period (including extensions) forfeit the next opportunity for a merit increase.

C. Reviewing Official. The responsibilities of the reviewing official are as follows.

- 1. Ensure duty areas and tasks are clearly expressed, aligned with the job classification, and lead to established goals, objectives, mission, expected practices and outcomes.
- 2. Ensure ratings are timely, fair, and consistent with recorded performance results. Employee comments concerning the evaluation are appropriately addressed, appeals are resolved, and documentation justifies ratings.
- 3. Ensure employee concerns are appropriately addressed and any necessary appeal process is observed and resolved.

D. Administering the Overall Performance Evaluation Process.

- 1. The Agency Fiscal Manger is responsible for managing, monitoring, evaluating, reporting, and tracking activity of the Performance Evaluation process. The Agency Fiscal Manager will track ratings and submissions and report, by supervisors, any unusual pattern to the reviewing official and the Board Chairman. The Agency Fiscal Manager will report general and unresolved issues to the Board Chairman, ensure the preparation and submission of OPM reports; maintenance of appropriate files; and provision of technical assistance to supervisors. The Fiscal Agency Manager will also report tardy submission of PE’s to the employee’s reviewing official and the Board Chairman.

2. APB Performance Evaluation activity is subject to reporting by OPM to the Legislative Council when a supervisor fails to prepare and submit an employee evaluation at least once in a twelve (12) month period for each employee he/she supervises. In addition, APB raters, the Agency Fiscal Manager and Board Chairman are subject to appear before the Arkansas Legislative Council to explain questionable ratings identified by the OPM.
 3. Once a PE report (signed by the rater, reviewing official, and employee) is forwarded to Agency Fiscal Manager, it cannot be changed, except as the result of the appeals process, and within the timeframes reflected in this policy.
- E. **Interim Reports.** A Performance Evaluation may be completed if the employee or supervisor is terminating employment or changing duties and the employee has worked in a job position 90 calendar days or more under the same supervisor. The Performance Evaluation is completed and processed in the same manner as an end of period report and must be clearly marked "Interim Report." The start and end dates of the abbreviated rating period should be indicated. Supervisors must consider interim reports as supplementary information when writing the end of period Performance Evaluation. These performance reports may be obtained from Agency Fiscal Manager.
- F. **Appeal**
1. **General Information.** Unless alleging unlawful discrimination, performance evaluations may not be appealed through the Employee Grievance Procedures. However, performance evaluations for non-probationary employees may be appealed through the provisions of this policy. The Equal Employment Opportunity (EEO)/Grievance Officer coordinates the appeal process and provides guidance when necessary. The Board Chairman or Reviewing Official may intervene at any step in the process to resolve the appeal. Once a written appeal is submitted, it cannot be amended. An appealed Performance Evaluation is an issue between the employee and the rater and no representation for either party is allowed. The appellant, rater or reviewing official may submit relevant information at any step of the appeal process. Relevancy of information requested or submitted will be determined by the EEO/Grievance Officer. An appeal may be terminated at any stage when an agreement between the parties is reached.
 2. **Process**
 - a. **Employee.** A non-probationary employee may initiate an appeal of his/her performance evaluation by completing and submitting an "Appeal of Performance Evaluation" to the APB EEO/Grievance Officer within five (5) working days of receiving the rater's performance rating. The EEO/Grievance Officer will provide a copy of the appeal to the supervisor and reviewing official.
 - b. **Reviewing Official.** The reviewing official has ten (10) working days to make a decision on the appeal and may choose to meet with the employee and/or rater in an effort to resolve the situation. The reviewing official will complete

the appropriate block of the appeal form indicating one of the following decisions: (1) Consensus was reached between the rater and employee and a revised or replacement evaluation or other solution satisfactory to both parties will be taken; or (2) An agreement cannot be reached and Board Chairman's decision is requested to resolve the matter.

c **EEO/Grievance Officer.** Upon receiving an appeal packet, the EEO/Grievance Officer will take one of the following actions: (1) Close the appeal action if the reviewing official or rater successfully resolved the appeal. or (2) Schedule a meeting with the employee, rater and reviewing official and gain consensus. or (3) Convene an appeals committee hearing following the time lines in the Administrative Directive on Employee Grievance procedures. and/or (4) make an appropriate recommendation to the Board Chairman to resolve the situation.

3. **Appeals Committee.** The EEO/Grievance Officer may activate an appeal committee when the supervisory chain is unable to resolve an appeal, as appropriate. The appeal committee consists of three (3) members selected by the EEO/Grievance Officer from the Commissioners or Hearing Officers and the EEO/Grievance Officer who serves as a non-voting chairperson. Meetings should not exceed one (1) hour with the time divided equitably between the employee and the rater/reviewing official. A summary of the committee recommendation will be forwarded to the Board Chairman for approval or modification as considered appropriate. A decision of the Board Chairman will be given to the EEO Grievance Officer within 15 working days. The decision is final and binding on all parties. The EEO/Grievance Officer will notify the reviewing official, rater, and employee of the decision. The EEO/Grievance Officer will maintain completed paperwork as appropriate.

IV. ATTACHMENTS.

AD 07-01 Form 1 Functional Job Description and Tasks
AD 07-01 Form 2 Employee Performance Evaluation Input
AD 07-01 Form 3 EMP Employee Performance Evaluations
AD 07-01 Form 3 EXE Executive/Deputy Director Performance Evaluations
AD 07-01 Form 3 SRM Senior Management Performance Evaluations
AD 07-01 Form 4 Appeal of Performance Evaluation
AD 07-01 Form 5 Transmittal Letter

**Arkansas Parole Board
FUNCTIONAL JOB DESCRIPTION & TASKS**

If minor changes are required during the year, your supervisor will write-in changes, initial and obtain your initial. Significant changes may require a new document to be implemented, again with appropriate signatures.

Employee's Name		Personnel No.	Position No.
Job Title			
Rating Period from:			To:
Location:			
FLSA:	Non-Exempt	Exempt	Check if employee supervises staff
Rater's Name		Rater's Personnel #:	Phone:
The following signature blocks are completed at the beginning of the rating period:			
Supervisor's Signature	Date	Reviewing Official's Signature	Date
*Employee's Signature	Date		
<p>* By my signature, I certify that I have been given a copy of the completed Functional Job Description and Tasks and a copy of the Performance Evaluation document and understand the factors and performance levels on which I will be evaluated.</p> <p>You must: {Type here; row will expand for more text}</p>			

**Arkansas Parole Board
EMPLOYEE PERFORMANCE EVALUATION INPUT**

Arkansas Parole Board EMPLOYEE PERFORMANCE EVALUATION INPUT		
Employee's Name	Personnel No.	Position No.
Job Title	Rating Period from:	To:
<p>Instructions. Provide comments and justifications, as appropriate, below each item. Submit this form before the scheduled PE review date. You may want to also include any specific character traits and explain how you demonstrate those characteristics in your day-to-day work performance.</p>		
<p>PROFESSIONALISM – Your overall demeanor and exhibited behavior both within and external to the agency. Enthusiasm, spirit of cooperation on the job; Your behavior and adherence to the agencies code of ethics and rules of conduct.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>QUALITY OF WORK – Degree of correctness of work you performed; accuracy & skill regardless of work quantity; neatness & thoroughness in completing assignments; usability & dependability of results; professional/technical competence.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>QUANTITY OF WORK – Amount of acceptable work you produced during work period; circumstance under which work is performed; amount of work produced relative to employee's skill; achievements/usable results from personal efforts.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>JOB KNOWLEDGE - The information you should know concerning work duties, which you should know for a satisfactory job performance; familiarity with the job elements; levels of practical & theoretical knowledge gained through work experience, education & training; understanding job relevance to other APB jobs; comprehensive knowledge required in present position; familiarity with other APB programs & requirements.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>ATTENDANCE – The degree to which you report for and remain at work as required.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>PRESENTATION AND APPEARANCE – The professional impression you make on others.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>SELF-IMPROVEMENT – The self generated effort you expend for overall improvement.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		
<p>ACCEPTABILITY – Your ability to get along with others; work in a cooperative and professional manner and to maintain respect and confidence.</p>		
<p>Comments: {Type here; row will expand for more text}</p>		

PUBLIC RELATIONS – The manner in which you deal with the public through telephone conversation, correspondence or face-to-face contact.

Comments: {Type here; row will expand for more text}

EMPLOYEE RELATIONS – The degree to which an employee gets along with other employees on the job.

Comments: {Type here; row will expand for more text}

DECISION MAKING – Your willingness and ability to arrive at a conclusion or a course of action be able to explain that decision, and understand the ramifications of that decision. Decisive, recognizes key factors and finalize difficult decisions.

Comments: {Type here; row will expand for more text}

ORGANIZING ABILITY – Your ability to structure the work activity to allow accomplishments of the job responsibility in an orderly and efficient manner.

Comments: {Type here; row will expand for more text}

RESPONSIBILITY – Knowing and doing what is expected of you; the willingness to assume and conscientiously discharge the obligation of the duties and responsibilities assigned to the position.

Comments: {Type here; row will expand for more text}

ARKANSAS PAROLE BOARD

EMPLOYEE PERFORMANCE EVALUATION FORM

 Annual Report

 Interim Report

PART I – RATED EMPLOYEE IDENTIFICATION

Name (<i>Last, First, MI</i>)	Personnel Number	Agency
Position Title	Class Code	Position Number

PART II – RATER EMPLOYEE IDENTIFICATION

Name of Rater (<i>Last, First, MI</i>)	Telephone Number	Position Title
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PART III – REVIEWING OFFICIAL EMPLOYEE IDENTIFICATION

Name of Reviewing Official (<i>Last, First, MI</i>)	Telephone Number	Position Title
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DEFINITIONS OF PERFORMANCE LEVELS

Exceeds Standards = 5 points—The employee’s performance is clearly superior in meeting requirements of the job leaving little, if anything to be desired. The employee has excellent work habits and follows through. Depth of knowledge of all processes related to the job is unexcelled. Very little, if any direction is required. The employee consistently demonstrates exceptional level of performance. The employee’s own high standards have either increased the effectiveness of the unit or set the example for others to follow. This rating characterizes an excellent employee who consistently does far more than what is expected or required.

Above Average = 4—The employee’s performance regularly meets and often exceeds the requirements of the job. The employee demonstrates a desire and ability to exceed an acceptable or satisfactory level of performance and has a thorough understanding of all processes related to the job. This rating characterizes the employee as doing more than what is expected or more than what the job requires.

Satisfactory = 3—The employee’s job performance is at a satisfactory level. Performance is reasonably adequate and the employee regularly meets work requirements. The employee demonstrates willingness and ability to meet an acceptable level of performance and understands processes and the importance of each process related to the job. This rating characterizes the employee as doing the job in a fully satisfactory manner.

Needs Improvement = 2—The employee’s performance sometimes fails to meet job standards. The employee is inconsistent in attending to details and has little understanding of the processes involved in the job. The employee has demonstrated some willingness and ability to improve performance through additional education and training. This rating indicates performance that is less than satisfactory and requires corrective action to improve performance.

Unsatisfactory = 1—The employee’s performance clearly and consistently fails to meet the requirements of the job. The employee shows either unwillingness or an inability to improve. This rating indicates inadequate and unacceptable performance. Continued employment is in doubt.

PART IV – PERFORMANCE STANDARDS

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

<input type="checkbox"/> Annual Report	<input type="checkbox"/> Interim Report
Employee's Name _____ Personnel No. _____ Position No. _____	
Job Title _____ Increase Eligibility Date: _____	
Rating Period From: _____ To: _____	
Duty Area:	
Standard:	
Results:	
Comments:	
Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>	
Duty Area:	
Standard:	
Results:	
Comments:	
Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>	
Duty Area:	
Standard:	
Results:	
Comments:	
Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Needs Improvement <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>	

PART V – OVERALL RATING

Overall Rating- It is understood that an Unsatisfactory, Improvement Needed in any above fields precludes awarding an Exceeds Standard or Above Average rating during this period. **The overall rating received is determined at the discretion of the rating official.**

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Rating Period Beginning Date: _____ Rating Period Ending Date: _____

By signing below the employee concurs only that the performance evaluation has been conducted. The employee's signature does not indicate that he or she agrees with the evaluation. Comments concerning performance may be submitted on a separate sheet.

Employee's Signature _____ Date: _____

By Signing below the supervisor certifies that all subordinate performance evaluations have been completed and forwarded to the reviewing official.

Rater's Signature: _____ Date: _____

Reviewing Official's Signature: _____ Date: _____

ARKANSAS PAROLE BOARD

Annual Report

PERFORMANCE EVALUATION ADDENDUM

Interim Report

PART I – RATED EMPLOYEE IDENTIFICATION

Name (*Last, First, MI*)

Personnel Number

Agency

PART II – ADDITIONAL STANDARDS

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

Duty Area:

Standard:

Results:

Comments:

Exceeds Standard Above Average Satisfactory Needs Improvement Unsatisfactory

ARKANSAS PAROLE BOARD

EXECUTIVE/DIRECTOR/DEPUTY DIRECTOR PERFORMANCE EVALUATION FORM

PART I – RATED EMPLOYEE IDENTIFICATION

Name (<i>Last, First, MI</i>)	Personnel Number	Agency
Position Title	Class Code	Position Number

PART II – RATER EMPLOYEE IDENTIFICATION

Name of Rater (<i>Last, First, MI</i>)	Telephone Number	Position Title
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PART III – CORE PERFORMANCE EXPECTATIONS

1. Job Knowledge – Thoroughly understands Governor’s/Director’s goals and objectives for agency, communicates overall objectives effectively to subordinate management, and ensures program/project completeness and integrity.
Comments:

Exceeds Standard Above Average Satisfactory Unsatisfactory

2. Accountability – Takes ultimate responsibility for developing, administering, and maintaining agency programs, policies, and procedures. Develops and uses agency resources appropriately to effectively and efficiently serve the citizens of the state of Arkansas.
Comments:

Exceeds Standard Above Average Satisfactory Unsatisfactory

3. Leadership – Effectively manages and maximizes talents of subordinate staff by ensuring adequate training and encouraging trust and cooperation within the work environment. Develops and maintains professional working relationships with legislative and executive personnel.
Comments:

Exceeds Standard Above Average Satisfactory Unsatisfactory

4. Decision Making Skills – Identifies and understands broad issues, problems, and opportunities, compares information from different sources to draw conclusions, and determines appropriate course of action.
Comments:

Exceeds Standard Above Average Satisfactory Unsatisfactory

5. Code of Conduct – Demonstrates honesty, respect for others, and trustworthiness, and adheres to confidentiality policies.
Comments:

Exceeds Standard Above Average Satisfactory Unsatisfactory

PART IV – OVERALL RATING

Overall Rating – It is understood that an Unsatisfactory in any above fields precludes awarding an Exceeds Standard or Above Average rating during this period. **The overall rating received is determined at the discretion of the rating official.**

Exceeds Standard Above Average Satisfactory Unsatisfactory

Rating Period Beginning Date: _____	Rating Period Ending Date: _____
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By signing below the employee concurs only that the performance evaluation has been conducted. The employee’s signature does not indicate that he or she agrees with the evaluation. Comments concerning performance may be submitted on a separate sheet.

Employees Signature: _____ Date: _____

Rater’s Signature: _____ Date: _____

ARKANSAS PAROLE BOARD

SENIOR MANAGEMENT PERFORMANCE EVALUATION FORM

PART I – RATED EMPLOYEE IDENTIFICATION

Name (<i>Last, First, MI</i>)	Personnel Number	Agency
Position Title	Class Code	Position Number

PART II – RATER EMPLOYEE IDENTIFICATION

Name of Rater (<i>Last, First, MI</i>)	Telephone Number	Position Title
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PART III – CORE PERFORMANCE EXPECTATIONS

<p>1. <u>Job Knowledge</u> – Demonstrates thorough knowledge of agency/institution missions, programs, goals, and objectives and effectively communicates program-specific information to subordinate staff.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>2. <u>Accountability</u> – Develops, administers, and maintains agency/institution division budgets, programs, policies, and procedures.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>3. <u>Leadership</u> – Clearly sets and communicates work goals and expectations, ensures staff is properly trained, and delegates specific duties and responsibilities to subordinate staff. Guides staff in accomplishing work objectives. Develops and maintains appropriate professional working relationships.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>4. <u>Decision Making Skills</u> – Researches, identifies, and resolves issues and potential problems. Delegates authority to staff to maximize organizational effectiveness.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>5. <u>Teamwork</u> – Exhibits cooperative and collaborative behavior with peers, subordinates, and superiors to create and maintain a positive, open working environment.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>6. <u>Adaptability</u> – Develops and implements new approaches, solutions, and processes to better serve the citizens of the state of Arkansas. Exhibits a proactive management style.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>7. <u>Quality of Work</u> – Consistently provides superiors with professional, complete, and correct reports, proposals, and organizational plans.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<p>8. <u>Code of Conduct</u> – Demonstrates honesty, respect for others, and trustworthiness, and adheres to confidentiality policies.</p> <p><u>Comments:</u></p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
<h4 style="margin: 0;">PART IV – OVERALL RATING</h4>	
<p><u>Overall Rating</u> – It is understood that an <u>Unsatisfactory</u> in any above fields precludes awarding an <u>Exceeds Standard</u> or <u>Above Average</u> rating during this period. The overall rating received is determined at the discretion of the rating official.</p> <p style="text-align: center;">Exceeds Standard <input type="checkbox"/> Above Average <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p>	
Rating Period Beginning Date: _____	Rating Period Ending Date: _____
<p>By signing below the employee concurs only that the performance evaluation has been conducted. The employee's signature does not indicate that he or she agrees with the evaluation. Comments concerning performance may be submitted on a separate sheet.</p>	
Employee's Signature: _____	Date: _____
Rater's Signature: _____	Date: _____



ARKANSAS PAROLE BOARD
Appeal of Performance Evaluation

TO: Grievance Officer

FROM: _____

DATE: _____

RE: Appeal of Performance Evaluation

Instructions. This form is to be completed by an employee when filling an appeal of his/her Performance Evaluation. This form must be filled in completely and submitted with appropriate attachments described below to the Grievance Office within five (5) working days after the employee receives his/her performance rating. Identify the reason(s) for the appeal in clear, unambiguous terms and include the specific change requested and the justification/explanation for the requested change.

Employee's Name: _____ Position Number: _____
Job Title: _____ Phone Number: _____

Rater's Name: _____ Phone Number: _____
Job Title: _____

Reviewer's Name: _____ Phone Number: _____
Job Title: _____

The following are attached:

- Copy of the completed Performance Evaluation Form with all attachments.
Copy of the completed Employee Performance Input Form with all attachments.
Other documentation as appropriate.

Employee Appeal:

Date forwarded by Employee to Grievance Office: _____

Date Received by Grievance Officer _____ Forwarded to Reviewing Official: _____

Date received by Reviewing Official: _____

Reviewing Official Comments/Actions (within 10 working days of receipt):

Attach Additional supporting documentation.

Matter is resolved (if resolved sign below) Matter is not resolved.

Employee Signature: _____ Date: _____

Rater Signature: _____ Date: _____

Reviewing Official Signature: _____ Date: _____

Date Forwarded to Grievance Officer. _____

Date received by Grievance Officer. _____

Date Grievance Officer completed. _____

Appeals Committee Review (if this alternative is chosen): _____

Date Grievance Officer completed a meeting with employee,
Reviewing official and employee (if this alternative is chosen): _____

Date Grievance Officer makes recommendation to
the Board Chairman (if this alternative is used). _____

Grievance Officer's discussion and/or recommendation:

No Change is recommended, or The following change must be made:

Board Chairman's Signature

Date Chairman forwards to Grievance Officer. _____

Date received by Grievance Officer. _____

Date Grievance Office notifies all concerned of Chairman's Decision: _____

If no changes are made Grievance Officer, must make appropriate notifications and close the file.
If changes are made, Grievance Officer must send this to the Agency Fiscal Manager along with
a copy of the revised performance evaluation; make appropriate notifications and close the file.



ARKANSAS PAROLE BOARD
PERFORMANCE EVALUATION TRANSMITTAL

TO: Leroy Brownlee, Chairman
RE: Performance Evaluation
FROM:
DATE:

Employee's Name: Personnel No.
Position Title: Position No Increase Eligibility Date:
Rating Period: From To
Rater's Name: Title:

INSTRUCTIONS FOR SUPERVISORS

Check if employee supervises staff.

Complete this form and attach the Employee Performance Evaluation with supporting documentation and forward to Agency Fiscal Manager.

SUPERVISOR'S CERTIFICATION AND RECOMMENDATION

Employee met merit criteria:

- 1 through 2.5 Unsatisfactory
2.6 through 2.9 Improvement Needed
3.0 through 3.7 Satisfactory
3.8 through 4.4 Above Average
4.5 through 5.0 Exceeds Standard

Employee did not qualify for a merit increase - Corrective Action Plan Attached.

Employee is a supervisor who did not timely submit all direct report PE's in accordance with current PE policy.

Supervisor's Signature Date Reviewing Official Signature Date