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**NORTHERN CAPE PROVINCIAL GOVERNMENT**

**sl 1-12 ANNUAL ASSESSMENT Template**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Employee** |  | **Component/Unit** |  |
| **Persal number** |  | **Performance cycle** |  |
| **Job Title** |  | **Period under Assessment** |  |
| **Name of the Supervisor** |  |  |  |
| **Name of Department** |  | | |

**Please use the rating scale below to rate each Key Performance Areas and Generic Assessment Factor**

|  |  |  |  |
| --- | --- | --- | --- |
| 1 Not Effective (less than or equal to 66%) | 2 Partially Effective (67%-99%) | 3 Fully Effective (100%-119%) | 4 Highly Effective (120%-133%) |
| **Performance does not meet the expected standard for the job. The review/assessment indicated that the jobholder has achieved less than fully effective results against all or almost all of the performance criteria and indicators as specified in the Performance Agreement and Workplan.** | **Performance meets some of the standards expected for the job. The review/assessment indicated that the jobholder has achieved less than fully effective results (partially achieved) against more than half of the performance criteria and indicators as specified in the Performance Agreement/Workplan.** | **Performance fully meets the standard expected in all areas of the job. The review/assessment indicates that the jobholder has achieved as a minimise effective results against all of the performance criteria and indicators as specified in the Performance Agreement/Workplan.**  . | **Performance far exceeds the standard expected of a jobholder at this level. The review/assessment indicates that the jobholder has achieved better than fully effective results against more than half/or in all areas of the performance criteria and indicators as specified in the PA and Workplan and maintained this in all areas of responsibility throughout the performance cycle.** |

**Employee performance: key result Areas**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **KRA NO 1:** | **GAFS** | | **Weight %** | **PERFORMANCE MEASURES** | | **Own Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
|  | 1 |  |  |  |  |  |  |  |
| 2 |  |
| 3 |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **KRA NO 2:** | **GAFS** | | **Weight %** | **PERFORMANCE MEASURES** | | **Own Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
|  | 1 |  |  |  |  |  |  |  |
| 2 |  |
| 3 |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **KRA NO 3:** | **GAFS** | | **Weight %** | **PERFORMANCE MEASURES** | | **Own Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
|  | 1 |  |  |  |  |  |  |  |
| 2 |  |
| 3 |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **KRA NO 4:** | **GAFS** | | **Weight %** | **PERFORMANCE MEASURES** | | **Own Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
|  | 1 |  |  |  |  |  |  |  |
| 2 |  |
| 3 |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **KRA NO 5:** | **GAFS** | | **Weight %** | **PERFORMANCE MEASURES** | | **Own Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
|  | 1 |  |  |  |  |  |  |  |
| 2 |  |
| 3 |  |

|  |
| --- |
| **Comments by the Employee on his/her performance** |
|  |

|  |
| --- |
| **Comments by the Supervisor** |
|  |

**AGREEMENT**

**WE (**Supervisor: Name and Surname**: …………………………………………………………………………………………………………….**

**(**Employee: Name and Surname**): ………………………………………………………………………………………………………………….**

**THE UNDERSIGNED ARE IN FULL AGREEMENT WITH THE RECORDED ASSESSMENT**

………………………………………………... ………………………………………………..

**NAME AND SURNAME OF SUPERVISOR NAME AND SURNAME OF EMPLOYEE**

………………………………………. ………………………………………..

**SIGNATURE OF SUPERVISOR SIGNATURE OF EMPLOYEE**

**DATE**……………………………….. **DATE**………………………………..

**NON-AGREEMENT**

**I (**Employee**) …………………………………………….. THE UNDERSIGNED DO NOT AGREE WITH THE RECORDED ASSESSMENT**

**……………………………………………..**

**SIGNATURE**

**DATE**………………………………….

**REASONS FOR NON-AGREEMENT**

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