

State of West Virginia
EMPLOYEE PERFORMANCE APPRAISAL

(EPA-1. Use for initial planning session, coaching, or when expectation must change.)

Employee's Name (Last, First, Middle):		Social Security Number:		
Position Title:		Time in Present Position (months):		
Department: Division: Section:		Type of Rating (Mark X below.)		
		Initial <input type="checkbox"/>	Coaching <input type="checkbox"/>	Special <input type="checkbox"/>
Rating Period	Supervisor's Name	Supervisor's Title		

Responsibilities: Essential duties and responsibilities as identified in the functional job descriptions.

Performance Standards and Expectations: Objectives to be accomplished during the rating period.

Acknowledgment: A discussion of duties, responsibilities, performance standards, and expectations for the current period took place on the date below. We acknowledge our understanding of these duties, responsibilities, standards, and expectations and how they will be used to measure work-related performance during this period.			
_____	_____	_____	_____
Supervisor's Signature	Date	Employee's Signature	Date