Form 1: Request for Administrative Review of Performance Evaluation

_____ _____

Employee Name Employee Number

_____ _____

Supervisor Name Date of Performance Evaluation

In as much detail as possible, please explain why you believe that your performance evaluation should be reviewed and attach any evidence that statements in your performance evaluation are inaccurate. This form must be timely submitted to the appropriate reviewer under the College's attached procedures or your evaluation may not be reviewed. If this is an appeal of a previous review, please attach all related Form 2s. Attach additional sheets as necessary.

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I understand that any statement I make on this Form 1 which is false, misleading, or not made in good faith may be grounds for discipline.

_____ _____

Employee Signature Date

Form 2: Administrative Review of Performance Evaluation

_____ _____

Employee Name Employee Number

_____ _____

Name of Employee's Supervisor Date of Performance Evaluation

_____

Date of Reviewer's Meeting with Employee and Employee's Supervisor

Please attach the Form 1 that prompted this review. In the space provided, please explain whether you find any contested objective statements in the performance evaluation to be probably false and whether you find any contested subjective statements in the performance evaluation to be clearly and convincingly false. Please explain your reasoning for each contested statement that you find to be false. Attach additional sheets as necessary.

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This decision represents my best judgment in this matter.

_____ _____ _____

Reviewer's Printed Name Reviewer's Signature Date

For Office Use Only Human Resources Date Received: _____

Receiving Employee in Human Resources: _____ _____

Printed Name Signature