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| **Performance Development Review** | | |
| **Name** | **Job Title** | |
| **Service Area** | **Team:** | |
| **Review Period: Initial: Y/N End of Year: Y/N** | | |
| **Look back:** | | |
| **What has gone well?** | | |
| **What has gone not so well?** | | |
| **What have you achieved?** | | |
| **What is still outstanding to be achieved?** | | |
| **Look forward:** | | |
| **Team Objectives:** | | |
| **Manager to share & discuss identified team objectives from LOIP/ BIP/ Team Plan** | | |
| **How will you contribute towards the achievement of this/ these team objectives?** | | |
| **Personal Objectives:** | | |
| **What are your objectives/ plans for the next review period?** | | |
| **How will you meet these?** | | |
| **Are there any possible barriers/ restrictions that may impact your achievement of any of these objectives?** | | |
| **What support, if any, might you need?** | | |
| **Is there a need for any mandatory/ legislative training?** | | |
| **Employee’s comments** | | |
| **Manager’s comments** | | |
| **Manager’s Signature** | | **Date** |
| **Employee Signature** | | **Date** |