

Name of employee

PROFESSIONAL SERVICES

FORM

Department	
Evaluative	
What were your objectives la	st year and how have you met these?
If not, what were the barriers	and how could these be resolved?

Are there any areas of good practice to share?
Looking forward and link to strategic plan
What will your proposed objectives be for the coming year? Your manager will discuss these with you.
year proposed on journal of the committee of the committe
Within your team, what will you focus on?

What are your plans for career developm	nent?
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The university is committed to developing	g women in leadership - is there anything we can do to help you?
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iat do you see a	s your profession	al development ne	eeds for the comi	ng year? Please	provide details o	of the sugge
ution with times	scales. Your manag	ger will discuss th	nese with you.			

Manager's Sum	mary (including agree	d objectives)	
Colleague comr	ments		
Verification of sign	off		
Manager			

Additional Comments If you have any additional comments or information that you were unable to fit in other sections, please include them below.