**CONTINUOUS PERFORMANCE MANAGEMENT (CPM)**

**NOTES & DISCUSSION FORM**

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| **Employee Information** | Employee Name:  |       | Performance Evaluation Year: |
| Employee Personnel #:  |       |
| Employee Job Title: |       |       |
| Dept/Office/Section/Unit:  |       |

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| [ ]  Favorable [ ]  Unfavorable | [ ]  Favorable [ ]  Unfavorable |
| **Date:** |       | **Time:** |       | **Date:** |       | **Time:** |       |
| *Employee Performance/Behavior Description* | *Employee Performance/Behavior Description* |
| Click or tap here to enter text. | Click or tap here to enter text. |

|  |  |
| --- | --- |
| [ ]  Favorable [ ]  Unfavorable | [ ]  Favorable [ ]  Unfavorable |
| **Date:** |       | **Time:** |       | **Date:** |       | **Time:** |       |
| *Employee Performance/Behavior Description* | *Employee Performance/Behavior Description* |
| Click or tap here to enter text. | Click or tap here to enter text. |

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| **Interim Discussion Sessions** |

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| Supervisor Signature: |       | Employee Signature: |       |