GOVERNMENT OF SAINT LUCIA

# PERFORMANCE APPRAISAL FORM

## SECTION A

1. Name of Employee _____

2. Ministry/Department _____ 3. Section/Division _____

4. Date of first entry into Gov't. Service _____ 5. Present Post _____

6. Grade _____ 7. Date Appointed to Present Post _____

8. Period covered by Appraisal _____ 9. Date of Appraisal _____

10. Name of Supervisor _____ 11. Post of Supervisor _____

## SECTION B

***Duties :*** *(Please provide below a summary of the duties which were assigned to the officer during the period under review which are different from those set out in the approved Job Description for the post and also, include details of acting appointments to a higher office or the assignment of supervisory responsibilities).*

***Results :*** *(Please indicate the work results expected from the officer. N.B. the results should be reasonable and measurable and should have been explained to the officer).*