

2019-2020 Merit Form

Review Period: July 1, 2018 - June 30, 2019

University of Colorado Boulder Research Faculty and Research Professor Series Annual Performance Rating

Every researcher must have this completed form on file in order to be eligible for a merit salary increase.

Please note: This rating form is subject to public disclosure, upon proper request, under the Colorado Open Records Act.

Name:	Position Title:
EID:	ORG# of Department: Name of the Department:

The performance of the above-named individual at his/her current rank or position has been rated as:

5 = { } Far Exceeds Expectations

4 = { } Exceeds Normal Expectations

3 = { } Meets Normal Expectations

2 = { } Below expectations

1 = { } Unsatisfactory/Failed to Meet Expectations

Rater must print name and sign. Employee must sign. Both signatures are *Required*.

The signature indicates that the supervisor and employee have met and discussed the evaluation. The employee has the right to attach a document to supplement this evaluation. The employee is to receive a copy of the signed form.

Completed by: (print PI Name) _____	
_____	_____
PI Signature	Date
I agree with this evaluation	I disagree with this evaluation
_____	_____
Employee's Signature	Date