A picture containing icon

Description automatically generated**CONTINUOUS PERFORMANCE MANAGEMENT (CPM)**

**NOTES & DISCUSSION FORM**

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

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 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: |  |