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**KIBABII UNIVERSITY**

***(Knowledge for Development)***

**STAFF PERFORMANCE APPRAISAL REPORT**

***(For officers on scale 7 and above in the public universities grading)***

***Year 2016.***

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**PREAMBLE**

1. The Staff Performance Appraisal System (SPAS) is a component of Performance Management System in the Public Service and integrates individual employee work planning, target setting, execution of targets, performance reporting, feedback and appraisal.
2. The overall objective of the SPAS is to manage performance of employees
3. This appraisal report will be completed by officers in Scale 7 and above. Officers in scale 6 and below will complete a separate appraisal report.
4. The Appraisee and the supervisor will set Specific, Measurable, Achievable, Realistic, and Time bound (SMART) targets aligned to the Departmental/Directorate/ Division/Section/Unit objectives as indicated in the annual work plan.
5. The SPAS form shall be filled by the appraisee in consultation with the supervisor.
6. The Appraisee and the Supervisor should read the SPAS guidelines prior to embarking on the actual appraisal.
7. The completed SPAS report shall be submitted to the Deputy Registrar (Administration and Human Resource) at the end of the appraisal period for deliberation by the Departments and Staff Establishment Training and Appraisal Committee.
8. The Staff Establishment Training and Appraisal Committee Report shall be submitted to the

University Management Board at the end of the Appraisal Period.

1. **Rating Scale:** The following rating shall be used to indicate the level of performance

by an Appraisee

|  |  |  |
| --- | --- | --- |
| **Achievement of Performance Targets** | **Rating Scale** | |
| Achievement higher than 100% of the agreed  Performance targets. | Excellent | 101% + |
| Achievement up to 100% of the agreed performance  Targets. | Very Good | 100% |
| Achievement between 80% and 99% of the  agreed performance targets. | Good | 80% - 99% |
| Achievement between 60% and 79% of the  agreed performance targets. | Fair | 60% - 79% |
| Achievement between 0% and 59% of the  agreed performance targets. | Poor | 59% and Below |

10. Performance rating scores shall be based on verifiable evidence.

11. Where the Appraisee is not satisfied with the SPAS evaluation, he/she may appeal

to the Chairperson of SETA Committee

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**STAFF PERFORMANCE APPRAISAL REPORT**

**Performance Appraisal Period:** From …………….…………...To ………………………………..

**Section 1: Employment Details**

(i) Personal No(Pf. No) …….………… ……………………..Surname …………………………….

First Name ………………..……..Other Names……….……………………………………………..

(ii) Designation ……………………….Terms of Service………………………………………….…

Job Group / Salary Scale / Pay Grade. ………………………..………………………………………

(iii)Department………………………………Division……………………………………………….

Section/Unit……………………Duty Station ………………………………………………………..

(iv) Supervisor’s Name ……………………………………………………………………………….

Designation ……………………………………………………………………………………....

**Section 2(a): Individual Performance Targets derived from the Departmental /**

**Directorate / Division / Section / Unit / Supervisor’s Work Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| **(A)**  **Agreed Performance**  **Targets** | **(B)**  **Performance Indicator(s)** | **(C)**  **Achieved results in**  **line with the**  **performance**  **indicator** | **(D)**  **Performance**  **Appraisal Score**  **(See Rating**  **Scale)** |
| (To be completed by the Appraisee in  consultation with the Supervisor at the  beginning of the appraisal period) | (To be completed by the  Supervisor in consultation with the  Appraisee at the end of the  appraisal period) | | |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| **Total appraisal score on performance targets** | | |  |
| **Mean appraisal score (%)** | | |  |

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**Section 2(b): To be signed at the beginning of the appraisal period**

The Appraisee’s commitment to achieve the agreed individual performance targets.

Name of Appraisee …………………………………………….……………………………………..

Signature ………………………………………………………Date…………………………………

Supervisor’s Name …………………………………………….………………………………………………….…….

Signature ……………………………………...Date …………………………………………………..

*(Immediate Supervisor)*

**Section 2(c): Staff Training and Development Needs**

Appraisee’s training and development needs in order of priority as Identified by the appraisee and supervisor based on performance gaps

………………………………………………………………………………………………………

……………………………………………………………………………………………………

**Section 3: Mid-Year Review**

Supervisor’s

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Agreed**  **Performance**  **Targets** | | **Performance Indicator (s)** | **Targets**  **changed or**  **added** | **Remarks**  **(Indicate Level of**  **Achievement)** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |

Supervisor’s Name …………………………………………….

Signature ……………………………………..Date …………………………………………………..

**Section 4:** Supervisor’s comments on appraisee’s performance at the end of the year including any factors that hindered performance (Please indicate if the appraissee requires to be put on a performance improvement plan/programme. If so, indicate the type).

…………………………………………………………………………………………………

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Supervisor’s Name…………………………………………….……………………………………….

Signature ……………………………Date……………………………………………

**Section 5:** Recommendation of rewards or sanctions to the Vice Chancellor by the Staff Establishment Training and Appraisal Committee

1. Reward type (Bonus, Commendation letter etc)..........................................................
2. Sanction (Warning, Separation, etc.).............................................................................
3. Minute No…………………………Meeting held on ………………………………………..

**Signed**:

Chairperson: Name.........................................................................................................

Signature .........................................................Date: …………………................….........

Secretary: Name ............................................................................................................

Signature .............................…………………………..Date: ...........................................

**Authorized Officer: Approved/ Not Approved**

……………………………………………………………………………………………………

………………………………………………………..…........................................................

Name.................................................................................................................................

Signature ............................................................................Date: ...................................

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**Contacts**

The Vice Chancellor

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**Mission**

To achieve excellence in generation, transmission and enhancement of new knowledge in science, technology and innovation through quality teaching, research, training, scholarship, consultancy and outreach programmes.

**Vision**

To be a global and dynamic University of excellence in Science, Technology and Innovation.

**Core values**

Productivity

Professionalism

Excellence

Accountability

Transparency

Equity

Integrity

Academic freedom

Social responsibility

Innovation

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