



འཇམ་གཤམ་རྒྱལ་པོ་གསོ་རིག་གཞུག་ལག་སློབ་སྡེ།
Khesar Gyalpo University of Medical Sciences of Bhutan
Royal Government of Bhutan



Thimphu: Bhutan
SUMMATIVE PERFORMANCE REVIEW FORM

For the period _____ to _____

Employee / Supervisor Information

Name of Agency:

Name of the Employee:

Employee ID No:

Position Title:

Position Level:

Name of the Supervisor:

Position Title of the Supervisor:

Process: In the first instance, the employee is to complete the Summative Review Form as best they can with reference to the Work Planning and Review Forms. Performance Outputs and Core Competencies are to be listed/described and a 'self-rating' given along with supplementary information where necessary. Note: under Performance Outputs, a separate rating is required for both the 'quantity' and 'quality' sections. When complete, the form is then submitted to their supervisor. The supervisor will review the form and make appropriate notes. A meeting between the supervisor and employee is then arranged to discuss the Summative Review Form in more detail and finalize ratings. The 'final rating' is to be approved and written down by the Supervisor.



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SUMMATIVE PERFORMANCE REVIEW FORM (CONTINUED)

RATINGS ON PERFORMANCE FACTORS

(Use additional sheets if required)

| <i>(Ratings should pertain to Performance Outputs as outlined in Work Planning and Review Forms. Add additional outputs as necessary)</i> | Employee self rating: | Final rating (Supervisor) |
|---|------------------------------|----------------------------------|
| PERFORMANCE OUTPUT 1: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| PERFORMANCE OUTPUT 2: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| PERFORMANCE OUTPUT 3: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| PERFORMANCE OUTPUT 4: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| PERFORMANCE OUTPUT 5: | | |
| Quantity of Work: | | |
| Quality of Work: | | |



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| | | |
|--|----------------------------|--|
| | | |
| PERFORMANCE OUTPUT 6: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| PERFORMANCE OUTPUT 7: | | |
| Quantity of Work: | | |
| Quality of Work: | | |
| Divide 'Total Final Rating' by number of individual final ratings = | TOTAL FINAL RATING: | |
| | AVERAGE RATING (A): | |
| | | |

(Signature of the Employee)

(Signature of the Supervisor)

NOTE: TO BE SUBMITTED BY THE HRO TO THE RESPECTIVE SUPERVISOR FOR RATING



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SUMMATIVE PERFORMANCE REVIEW FORM (CONTINUED)

RATINGS ON CORE COMPETENCIES

| (To be completed by the Employee) | | | |
|---|------------------|------------------------------|-----------------------------------|
| Core Competency | Comments: | Employee Self-rating: | Final Rating (Supervisor): |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| | | TOTAL FINAL RATING: | |
| Divide 'Total Final Rating' by 6 = | | AVERAGE RATING (B): | |

(Signature of the Employee)

(Signature of the Supervisor)

NOTE: TO BE SUBMITTED BY THE HRO TO THE RESPECTIVE SUPERVISOR FOR RATING



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SUMMATIVE PERFORMANCE REVIEW FORM (CONTINUED)

RATINGS ON PEER FEEDBACK

| To be completed by HRO | | *Final rating (average peer rating) |
|---|----------------------------------|--|
| Integrity (honesty and truthfulness of one's action, adherence to moral and ethical principles in one's conduct.) | | |
| Leadership (influences others to achieve department, faculty and university goals) | | |
| Team work/collaboration (work together with colleagues at various levels to solve problems, improve work processes or accomplish specific task.) | | |
| Communication (clarity in expression of ideas, effectiveness of both verbal and written communication, effectiveness in listening and interacting with others in a helpful and informative manner) | | |
| | Total final rating | |
| Divide "Total Final Rating by 4" * Average rating of three peers from the peer feedback form | Average final rating (C) | |



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SUMMATIVE PERFORMANCE REVIEW FORM (CONTINUED)

RATINGS ON STUDENTS' FEEDBACK

This rating on students' feedback shall be applicable only to academicians of the faculty. The HRO of respective faculties of the university shall be responsible in compiling feedback forms and award rating.

| To be filled by HRO | | |
|---|--|----------------------------|
| Semester/ Modules | | Rating by HRO* |
| Semester 1 | | |
| 1. Module /subject | | |
| 2. Module /subject | | |
| 3. Module / subject | | |
| 4. Module / subject | | |
| 5. Module / subject | | |
| Semester 2 | | |
| 1. Module / subject | | |
| 2. Module / subject | | |
| 3. Module / subject | | |
| 4. Module / subject | | |
| 5. Module / subject | | |
| Total Final Rating: | | |
| Divide Total Final Rating by number of rated modules. | | Average Rating (D) |

$$* \text{ Rating} = \frac{(\sum \text{ individual score on module/subject})}{(\text{No of students who submitted the form} * 13)}$$



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DEVELOPMENT NEED OF THE EMPLOYEE

Comments by the Employee

(Comment on some of your special achievement and on areas that you need to improve)

(You should also mention your contribution on outcomes and impact as a result of your output)

(Signature of the Employee)

Comments by the Supervisor:

(Comment on the special achievements and/or development needs of the employee and suggest some measures to improve the performance of the employee)

(Signature of the Supervisor)



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SUMMATIVE PERFORMANCE REVIEW FORM (CONTINUED)

THE HR OFFICER SHALL COMPLETE THE FINAL RATINGS CALCULATION BELOW, ENSURE ALL THE REQUIREMENTS ARE FULFILLED AND FORWARD THE SUMMATIVE REVIEW FORM TO THE HRC FOR REVIEW AND FINAL APPROVAL.

| | FINAL RATING CALCULATIONS | |
|---------------|------------------------------------|-------------------------------------|
| | Weight-age for Academicians | Weight-age for General Staff |
| A(Output) | * 50% | * 50% |
| B(Competency) | * 30% | * 30% |
| C(Peer) | * 10% | * 20% |
| D(Students) | * 10% | |
| Total(E) | | |

If C = [tick appropriate box to confirm Final Rating and associated Performance Increment (PI)]:

- 3.50 – 4.00 Outstanding (2 PI) 1.50 – 2.49 Good (1 PI)
 2.50 – 3.49 Very Good (1 PI) 0 – 1.49 Improvement Needed (0 PI)

Name and Signature of HR Officer
(Faculty / University)

Approval by Head
(Faculty / University)



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Comments by HRC Faculty/ University:

(Comment on the general performance and potential of the employee)

Name and Signature of Chairperson HRC