ANNEXURE 12/6



ROYAL CIVIL SERVICE COMMISSION PERFORMANCE APPRAISAL FORM FOR

OPERATIONAL CATEGORY

For the period: _____to ____



Agency:

Name of the Employee:

Employee ID No:

Position Title:

Name of the Supervisor:

Core Competency		Rating (Supervisor):	Comments
2.	Attitude		
3.	Punctuality		
4.	Courtesy		
5.			
6.			
7.			
TOTAL			Average rating*

*For average rating, divide the 'Total' by 7

(Signature of the Employee)

(Signature of the Supervisor)

(Signature of the Manager)