

# SENIOR SYSTEM CIVILIAN EVALUATION REPORT

For use of this form, see AR 690-400; the proponent agency is ASA(M&RA).

## PART I - ADMINISTRATIVE DATA

a. NAME (Last, First, Middle Initial)		b. POSITION TITLE, PAY PLAN, SERIES AND GRADE	
c. ORGANIZATION/INSTALLATION		d. REASON FOR SUBMISSION <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> INTERN	
e. PERIOD COVERED (YYYYMMDD) FROM                      THRU	f. RATED MOS.  <input type="checkbox"/> GIVEN TO RATEE	g. RATEE COPY (Check one and date)  <input type="checkbox"/> FORWARDED TO RATEE	

## PART II - AUTHENTICATION

a. NAME OF RATER (Last, First, Middle Initial)	SIGNATURE	DATE (YYYYMMDD)
GRADE/RANK, ORGANIZATION, DUTY ASSIGNMENT		
b. NAME OF INTERMEDIATE RATER (Optional)(Last, First, MI)	SIGNATURE	DATE (YYYYMMDD)
GRADE/RANK, ORGANIZATION, DUTY ASSIGNMENT		
c. NAME OF SENIOR RATER (Last, First, Middle Initial)(If used)	SIGNATURE	DATE (YYYYMMDD)
GRADE/RANK, ORGANIZATION, DUTY ASSIGNMENT		
d. RATEE: I understand my signature does not constitute agreement or disagreement with the evaluations of the Rater and Senior Rater, and merely verifies Part I and Part IV data.	SIGNATURE OF RATEE	DATE (YYYYMMDD)

## PART III - PERFORMANCE AWARD/QUALITY STEP INCREASE

a. SES - AWARD, BONUS/ SALARY INCREASE	RECOMMENDATIONS				b. ST, SL, GM, GS, WS - PERFORMANCE AWARD/QSI	
	RATING (1)	SALARY (2)		PERFORMANCE AWARD - BONUS (3)		PERCENT OF SALARY ( INCLUDES Locality Pay) % (OR) AMOUNT \$ (OR)
RECOMMENDING OFFICIALS		YES	NO	YES	NO	QSI (GS with Successful Level 1 Rating Only - minimum of 52 weeks must have elapsed since last QSI) TO (Grade/Step):
RATER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AWARD APPROVED BY
INTERMEDIATE RATER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PERFORMANCE REVIEW BOARD		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DATE (YYYYMMDD)
SENIOR RATER		ES		\$		FUND CITE

## PART IV - DUTY DESCRIPTION (Rater)

DAILY DUTIES AND SCOPE (To include as appropriate: people, equipment, facilities, and dollars). Position Description (DA Form 374) is correct:	<input type="checkbox"/> YES	<input type="checkbox"/> NO

## PART V - VALUES (Rater)

<b>VALUES</b> Loyalty Duty Respect Selfless service Honor Integrity Personal courage	BULLET COMMENTS

PERIOD COVERED (YYYYMMDD) thru		RATEE'S NAME	
<b>PART VI - PERFORMANCE EVALUATION</b> (Rater)			
a. PERFORMANCE DURING THIS RATING PERIOD Comparison of individual objectives against accomplishments and DA-established performance standards resulted in the following objectives ratings:			
<div><input type="checkbox"/> <b>Excellence</b> 75% or More Obj</div> <div><input type="checkbox"/> <b>Excellence</b> 25-74% Obj</div> <div><input type="checkbox"/> <b>Success All or</b> <b>Excellence</b></div> <div><input type="checkbox"/> <b>Needs Improvement</b> 1 or More Obj</div> <div><input type="checkbox"/> <b>Fails 1 or More</b> <b>Obj</b></div>			
Includes Excellence in Org Mgt/Ldshp <b>OR</b> EEO/AA Obj for supv/mgr <input type="checkbox"/> Yes <input type="checkbox"/> No			
b. BULLET EXAMPLES			
<b>PART VII - INTERMEDIATE RATER</b> (Optional)			
BULLET COMMENTS			
<b>PART VIII - SENIOR RATER</b> (if used) or <b>RATER</b> (no senior rater used)		<b>PART IX - SENIOR RATER</b> (if used)	
<div>OVERALL PERFORMANCE RATING</div> <div><div><div>1</div><div>2</div><div>3</div><div>4</div><div>5</div></div><div>} <b>SUCCESSFUL</b></div><div><b>FAIR</b></div><div><b>UNSUCCESSFUL</b> (<b>MUST</b> Have Senior Rater Review)</div></div>		<div>BULLET COMMENTS (Performance/Potential)</div> <div>A completed DA Form 7222-1 was received with this report and considered in my evaluation and review: <input type="checkbox"/> YES <input type="checkbox"/> NO (Explain)</div>	