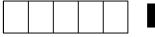
Department of Health and Human Services Public Health Service COMMISSIONED OFFICERS' EFFECTIVENESS REPORT

(download instructions at http://dcp.psc.gov/coerinstructions.pdf)



٦.

PHS Serial Number

| SECTION 1 RATED OFFICER INFORMATION Officer's Name Present Position/Billet Title | | | | | | | | | | | |
|---|--------------|--------------|----------------|------------|-----------|-----------|--|--|------------------------------------|--|--|
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| OPDIV: | | oor must doo | with a dution | accomplish | monte and | gools on | on attached page (only one page p | ammitted additional | nages will be discorded) | | |
| | | | | | | - | an attached page (only <i>one page</i> po A is lowest rating (attach <i>single</i> pag | | | | |
| | | | | | | 0 | | | 1.8 | | |
| | ⊖ A | ⊖ B | O C | O D | ⊖ E | | 1. QUANTITY OF WORK | | | | |
| | ⊖ A | O B | O C | O D | ОE | | 2. QUALITY OF WORK | | | | |
| | ⊖ A | ⊖ B | O C | O D | ОE | | | 3. PUNCTUALITY OF WORK | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | | 4. INITIATIVE, CREATIV | | MENT | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | | 5. PLANNING AND ORGA | | | | |
| | ΟA | ⊖ B | ОC | ⊖ D | ОE | | 6. ABILITY TO ANALYZE | PROBLEMS | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | ⊖ F | 7. SUPERVISORY SKILLS | 7. SUPERVISORY SKILLS | | | |
| | ΟA | ⊖ B | ОC | ⊖ D | ОE | | 8. ABILITY TO WORK WI | 8. ABILITY TO WORK WITH OTHERS | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | | 9. ABILITY TO EXPRESS | 9. ABILITY TO EXPRESS SELF VERBALLY AND IN WRITING | | | |
| | ΟA | ⊖ B | ОC | ⊖ D | ОE | | 10. PROFESSIONAL SKIL | 10. PROFESSIONAL SKILLS IN PRESENT ACTIVITY | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ⊖ E | | | 1. RESPONSIVENESS TO SUPERVISION | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | ΟF | | | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | ⊖ F | | WTH IN SKILLS DURING RATING PERIOD | | | |
| | ⊖ A | ⊖ B | ОC | ⊖ D | ОE | - | 14. COMMITMENT TO PH | | | | |
| | ⊖ A | ⊖ B | O C | O D | ОE | ⊖ F | | 15. MANAGERIAL RESPONSIBILITY | | | |
| | $\bigcirc A$ | | | | | | | | | | |
| | $\bigcirc A$ | | O C | O D | ⊖ E | ⊖ F | - | | | | |
| _ | ⊖ A | ⊖ B | O C | ⊖ D | ⊖ e | | 18. OVERALL JOB PERFORMANCE | | | | |
| Supervisor's Name & Grade (please print)Supervisor's Signature/DateSupervisor's Phone NumberHow long have yo supervised this official | | | | | | | | | | | |
| Date of Report: Period Co | | | | | | overed by | 7 Report | Type of COER |) Transfer (officer or supervisor) | | |
| | | | | | | | through | |) Other | | |
| SECTION III SIGNATURE OF OFFICER AND REVIEWING OFFICIAL | | | | | | | | | | | |
| | | | | | | | | | | | |
| 1. TO BE FILLED OUT BY OFFICER BEING RATED: Rated Officer Signature/Date: A. Leonour with this evolution Image: Contemporture of the second secon | | | | | | | | | | | |
| A. I concur with this evaluation. B. I disagree with this evaluation, comments are attached. | | | | | | L | have read this evaluation and had an | opportunity to discuss | it and have retained a copy. | | |
| 2. TO I | BE FILLE | D OUT BY I | REVIEWING | GOFFICIAL | : | | | | | | |
| COMMENTS: | | | | | | | | | | | |
| O B. Although this evaluation is reasonable, this rater is a somewhat <i>more</i> | | | | | | | | | | | |
| demanding rater than most. O C. Although this evaluation is reasonable, this rater is a somewhat <i>less</i> | | | | | | | | | | | |
| demanding rater than most. O D. I disagree with this evaluation in the following ways: | | | | | | | IF ANY REVIEWING OFFICIAL DOES NOT CONCUR FULLY, IT IS HIS/HER RESPONSIBILITY TO PROVIDE THE RATED OFFICER WITH A COPY REFLECTING THE NON-CONCURRING COMMENTS. | | | | |
| Reviewi | ng Officia | l Name/Title | (please print) |): | | | Reviewing Official Signature/Date: | | | | |
| | | | | | | | | | 53827 | | |