



APPENDIX C - CAO Annual Review Process – Direct Report Feedback Form

<p><i>Rate each of the following according to <u>your</u> own assessment of the CAO's performance and provide comments.</i></p>	<p>0 = Not applicable/Can't rate 1 = Never demonstrates 2 = Seldom demonstrates 3 = Sometimes demonstrates 4 = Usually demonstrates 5 = Always demonstrates</p>					
<p>Relationship with Staff</p>	<p>0</p>	<p>1</p>	<p>2</p>	<p>3</p>	<p>4</p>	<p>5</p>
<p>Models Corporation's values for staff; holds others accountable</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Builds personal relationships with staff; makes a personal connection; asks questions; is genuinely interested</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Inspires, motivates and guides Corporation employees; fosters a culture of service excellence and teamwork; facilitates team success</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Actively supports and encourages professional development among staff</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Consults with senior staff on policy and operational issues</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Oversees effective recruitment and retention of staff capable of meeting municipal objectives</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Promotes a clear understanding of roles between staff and Mayor and Council</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Ensures effective, regular communication with staff; invites input</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Relationship with Staff - Overall</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Name: _____

Date: _____

Signature