**[**Departmental logo**]**

**ANNEXURE E1**

**chief Director and Director Performance MID-YEAR REVIEW Template**

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| **Name of the SMS member** |  | **Job title** |  | | |
| **Persal Number** |  | **Performance cycle** |  | | |
| **Name of the Supervisor** |  | **Mid-Year review** | April - September | Yes | No |
| **Name of Department** |  |  |
| **Province (if applicable)** |  | | | | |

**Employee performance: Key Result Areas (KRAs)**

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| **KRA NO 1:** | | | | | |
| **ACTIVITIES** | **PERFORMANCE MEASURES** | | **SMS Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
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| **KRA NO 2:** | | | | | |
| **ACTIVITIES** | **PERFORMANCE MEASURES** | | **SMS Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
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| **KRA NO 3:** | | | | | |
| **ACTIVITIES** | **PERFORMANCE MEASURES** | | **SMS Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
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| **KRA NO 4:** | | | | | |
| **ACTIVITIES** | **PERFORMANCE MEASURES** | | **SMS Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
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| **KRA NO 5:** | | | | | |
| **ACTIVITIES** | **PERFORMANCE MEASURES** | | **SMS Rating** | **Supervisor Rating** | **Agreed Rating** |
| **TARGET** | **ACTUAL ACHIEVEMENT/EVIDENCE** |
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**Competencies: Personal Development Plan**

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| **No** |  | | **Dev. Required** | |
| **Core Management Competencies (CMCs)** | **Process Competencies (PCs)** | **CMCs** | **PCs** |
| **Yes/No** | **Yes/No** |
| 1 | Strategic Capability and Leadership | Knowledge Management |  |  |
| 2 | People Management and Empowerment | Service Delivery Innovation |  |  |
| 3 | Programme and Project Management | Problem solving and analysis |  |  |
| 4 | Financial Management | Client Orientation |  |  |
| 5 | Change Management | Customer focus Communication |  |  |
| **Other Development Required** | | | | |
| 1 |  | | | |
| 2 |  | | | |
| 3 |  | | | |

If any CMCs indicates yes for development required the PDP must be amended.

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| **Comment by the SMS member on his/her performance** |
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| **Comment by the Supervisor** |
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SMS Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor' Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_