CITY OF CLEVELAND  
DEPARTMENT OF PUBLIC SAFETY/DIVISION OF POLICE  
EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

Name: 
Department/Area: 

Position: ___________________________ From: _______________ To: _______________

**Instructions:** Based upon a review of department and/or area goals established for the above report period and your position description, you will be responsible for accomplishing specific objectives/expectations during this report period. Please note that your annual performance appraisal will be based, in part, upon the progress demonstrated toward accomplishment and actual obtainment of the objectives/expectations defined below. Up to six (6) objectives/expectations is required. As required, additional pages may be attached to this worksheet.

* This form may be used to establish a Performance Improvement Plan.

1. 

2. 

3. 

4. 

5. 

6. 

This form maybe used to the establish a Performance Improvement Plan.

Employee Signature: ___________________________ Date: ___

Immediate Supervisor Signature: ___________________________ Date: ___

Manager's Signature: ___________________________ Date: ___

Appointing Authority Signature: ___________________________ Date: ___

Director's Signature (if applicable): ___________________________ Date: ___