

ANNEX - E

Critical Incidents (CI) and Areas for Improvement (AI) Form

NAME OF OFFICIAL TO BE RATED	
POSITION DURING THE RATING PERIOD	
DEPARTMENT/AGENCY	
BUREAU/ SERVICE/ DIVISION	
RATING PERIOD	

CRITICAL INCIDENTS

S - SITUATION	T- TASK	A - ACTION	R - RESULT
<i>Use additional sheets if necessary</i>			

AREAS FOR IMPROVEMENT

SPECIFIC ASPECTS/ AREAS OF WORK PERFORMANCE NEEDING IMPROVEMENT	EXPECTED/ APPLIED QUALITY NORMS AND STANDARDS	RECOMMENDED INTERVENTIONS/ ACTIONS
<i>Use additional sheets if necessary</i>		

SIGNATURE OVER PRINTED NAME OF RATER	
POSITION DURING RATING PERIOD	
DEPARTMENT/ AGENCY	
BUREAU/ SERVICE/ DIVISION	
DATE ACCOMPLISHED	