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|  | Performance Evaluation System (PES) – Agency Transfer Evaluation Form |

* Applies to classified employees who were employed with a State Agency on June 30th of the performance year and transferred agencies between July 1 and September 30.
* Completion of this form will assign an evaluation of “Not Evaluated” to the affected employee.
* No additional PES evaluation form is required.
* Planning for the new performance year is required in accordance with SCS Rule 10.5.

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| Employee Name | Personnel # | Date |
|  |  |  |
| Employee Signature |  | |
|  | | |
| Evaluating Supervisor Name | Personnel # | Date |
|  |  |  |
| Evaluating Supervisor Signature |  | |