

Actions Needed to enhance employee's capabilities and hone potentials.

TRAINING

Type	Target Date	Objective	Expected Outcome

Employee's Comment

Superior's Recommendation as to Level, Salary or Position:

() With Salary Adjustment () Without Salary Adjustment Promoted to: EOC

Justify Recommendation:

Employee:

[Signature]

This review has been discussed
With me.

Supervisor:

[Signature]

Department Head:

(DO NOT DISCUSS "SALARY" PORTION WITHOUT PAM ATTACHMENT)
This appraisal must be returned to HRD.

[Signature]
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