

OFFICER PERFORMANCE REPORT (W2-O6)

NEW YORK NAVAL MILITIA

1. NAME (Last, First, MI, Suffix)		2. PAYGRADE	3. RANK
5. BILLET ASSIGNMENT	6. COMPONENT COAST GUARD MARINE CORPS NAVY <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> </div>		7. REGION
8. UNIT		9. PERIOD OF REPORT FROM: TO:	
10. PERIODS OF STATE ACTIVE DUTY (Date/Mission/Duties)			
11. PRIMARY/COLLATERAL DUTIES			

12. PERFORMANCE TRAITS	NOT OBSERVED	1.0 BELOW STANDARDS	2.0 PROGRESSING	3.0 MEETS STANDARDS	4.0 ABOVE STANDARDS	5.0 OUTSTANDING
ADAPTABILITY (Ability to anticipate, determine goals, identify relevant information, set priorities and deadlines)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMUNICATION SKILLS (ability to speak effectively, listen to understand, and express ideas clearly I written form)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HEALTH & WELL-BEING (ability to care for the physical and mental health, safety and well-being of self and others)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INITIATIVE (Responsibility, quantity of work)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JUDGMENT (Ability to make sound decisions and provide valid recommendations based on facts, experience, risk assessment, and analytical thought)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEADERSHIP (Organizing, motivating and developing others to accomplish goals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MILITARY BEARING (Appearance, conduct, physical fitness, and adherence to core values)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MISSION ACCOMPLISHMENT (How well assigned duties are carried out. Reflects aptitude, competence, and commitment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ORGANIZATIONAL CLIMATE/EQUAL OPPORTUNITY (Contributes to growth and development, human wvorth, community)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROFESSIONAL EXPERTISE/COMPETENCE (Technical knowledge and practical application)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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12. (CONT.) PERFORMANCE TRAITS	NOT OBSERVED	1.0 BELOW STANDARDS	2.0 PROGRESSING	3.0 MEETS STANDARDS	4.0 ABOVE STANDARDS	5.0 OUTSTANDING
PROFESSIONAL GROWTH/PME (Commitment to intellectual growth, including achieving relevant qualifications, and professional military education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TEAMWORK (Contributes toward team building and team results)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USING RESOURCES (Ability to manage time, materials, information, money, and people)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. COMMENTS:

14. PROMOTION RECOMMENDATION: NOT RECOMMENDED

☐

PROGRESSING

☐

RECOMMENDED

☐

15. SUPERVISOR NAME (Last, First, MI, Suffix)

RANK

SIGNATURE

DATE

16. REPORTING SENIOR (Last, First, MI, Suffix)

RANK

SIGNATURE

DATE

17. SIGNATURE OF OFFICER EVALUATED

I INTEND TO SUBMIT A STATEMENT:

☐

I DO NOT INTEND TO SUBMIT A STATEMENT:

☐

DATE