

**PERFORMANCE AGAINST TARGET FORM**

Job Holders Name..... Date.....

Department/Section .....

Job Title.....

Job Purpose .....

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<b>Key Result Area</b>	<b>Target</b>	<b>Comments</b>

Detailed comments (where necessary) .....

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Supervisor's Signature.....

Job Holder's Signature ..... Next Review Date.....

**NOTE: This form should be used for continuous assessment and target review**