

GOVERNMENT OF UGANDA

(This form should be filled at the beginning of the Assessment period)



THE REPUBLIC OF UGANDA

PERFORMANCE PLAN

Period of assessment ..... to .....

Name of appraise .....

Job Title/Rank .....salary Scale.....

Job Description (Summary).....

.....

.....

OUT-PUT	PERFORMANCE INDICATORS	PERFORMANCE TAGETS
1		
2		
3		
4		
5		

6		
7		
8		
9		
10		

Signature of Appraisee..... Date.....

Name and Signature of Appraiser..... Date.....