FIRST JUDICIAL DISTRICT OF PENNSYLVANIA Employee Work Plan

Employee Name:	Payroll No.
Supervisor/Manager Name:	
Department:	
Performance Goals (list major goals or accountabilities - include	e time frame and method of measurement):
Training/Assistance:	
Supervisor's Comments:	
Employee's Comments:	
I acknowledge that I have discussed this work plan with my performance required.	supervisor, and understand the level of
Signature of Employee	
Signature of Supervisor	Date