



Louisville Metro
Government

2

Mid-Year Check-In

Purpose: Provide quick feedback to make sure goals and progress are on track for success.

Employee name _____ Manager name _____
Employee ID _____ Check-in date _____

Basic Expectations

Time and attendance (Leave under the FMLA Act is not to be considered or referenced)

Time used _____ Time remaining _____
___ Does not meet expectations ___ Meets expectations ___ Exceeds expectations

Compliance with policy and procedures

___ Does not meet expectations ___ Meets expectations ___ Exceeds expectations

Section 1: Core Responsibilities and Goals Progress

Goal health describes whether or not the goal or initiative is on schedule using a color-coded scale: Green (On track), Yellow (Slightly off track), or Red (Off track).

Core Responsibility #1

SMART goal: _____
Changes
needed: _____

Goal Health

___ Green
___ Yellow
___ Red

Core Responsibility #2

SMART goal: _____
Changes
needed: _____

Goal Health

___ Green
___ Yellow
___ Red

Core Responsibility #3 (optional)

SMART goal: _____
Changes
needed: _____

Goal Health

___ Green
___ Yellow
___ Red

Section 2: Individual Development Goal Progress

Refer to the employee's Metro HR Individual Development Plan if completed.

Individual Development Goal #1 SMART goal: _____ Changes needed: _____	Goal Health <input type="checkbox"/> Green <input type="checkbox"/> Yellow <input type="checkbox"/> Red
Individual Development Goal #2 (optional) SMART goal: _____ Changes needed: _____	Goal Health <input type="checkbox"/> Green <input type="checkbox"/> Yellow <input type="checkbox"/> Red

Section 3: Demonstrating Core Values

Integrity and transparency	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Mutual trust and respect	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Teamwork and partnership	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Continuous improvement	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Positivity	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Safety commitment	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations

Complete the following only if employee is in a manager or supervisor role:

Performance coaching and feedback	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations
Talent development	<input type="checkbox"/> Does not meet expectations	<input type="checkbox"/> Meets expectations	<input type="checkbox"/> Exceeds expectations

Comments

Signatures

I certify that I have reviewed this document.

Employee signature _____	Date _____
Manager signature _____	Date _____

