PEP Statistical Data Collection Form For Management, Skilled, Professional Service, and Special Appointment Employees (Please print or type)

Employee's Name:					
	Last		First		МІ
W#:			Inc. Month:	_January	July
(require		FY 20	<u>—</u>		
DHMH Agency: Office of Human Resources					
Mid Cycle Rating:	3 (outstanding	ı)	2 (satisfactory) 1 (u	ınsatisfactory)
End Cycle Rating:	3 (outstanding	ı)	2 (satisfactory)	1 (u	ınsatisfactory)
Person Completing Forr		Print Na		Date:	
Original to Office of Hun	nan Resources	(do not k	eep copies of th	is data)	

(This form is for statistical purposes only)