EMPLOYEE SELF-EVALUATION FORM

Employee Name: ____________________________________________

Classification: _____________________________________________

Supervisor: ________________________________________________

Department: ________________________________________________

Date: ______________________________________________________

Evaluation Period: __________________________________________

Please complete the following questions as thoroughly as possible. If additional space is needed, attach a separate sheet. This self-appraisal will provide input to your supervisor in preparing your Performance Evaluation Form.

1. In the space below, indicate your previously established goals and your achievement results toward each goal.

2. Have you accomplished all the goals established for this evaluation period? If not, explain any barriers to goal accomplishment that you have encountered.

3. Describe what you have done to improve your abilities, skills and job knowledge this evaluation period.

4. Identify areas you feel you need to improve upon and develop this coming year.
5. Do you think you have a complete understanding of the requirements of your job? If not, of what are you uncertain?

6. What training would you like to receive during the next evaluation period that would help you to perform your job more effectively?

7. Do you have any skills or talents that are not being used to the fullest in your present job? If so, what?

8. If there were one thing you would change to make you more effective in your job, what would it be?

9. Please indicate any other comments that you would like to make or you would like to discuss with your supervisor.