This is a fill in form. Please tab to next highlighted section.

**EMPLOYEE SELF-APPRAISAL WORKSHEET**

NAME:          DEPARTMENT:

EVALUATION PERIOD:

Your supervisor will be asked to complete your performance review for the period listed above. The following questions are designed to help promote two-way communication between you and your supervisor. This is your opportunity to highlight areas of your performance and indicate your goals and issues. Your perspective will help to ensure a more productive discussion.

Review your position description form and your prior evaluation. Complete the following in relation to your major job responsibilities.

1. If your position description does not accurately describe your current duties and responsibilities, please list the changes below:

2. What were your accomplishments/contributions during this period *(Cite specific examples when possible)*?

3. What, if any, were problem areas for you during this period?

4. If applicable, which training/development goals established in the last evaluation discussion were achieved and which will continue into the new period? Which goals were not achieved, and why?

5. What aspects of your performance would you like to develop during the next review period? What are your ideas about how to accomplish this?

6. In what areas, if any, would you like to receive more feedback from your supervisor?
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EMPLOYEE SELF-APPRAISAL WORKSHEET

NAME:          DEPARTMENT:
EVALUATION PERIOD:

7. General comments about your performance in the last year (items not covered above):

Signature: ______________________________ Date: ______________

Do you wish to have this attached to your performance review?  □ Yes / □ No