SELF-EVALUATION FORM

This form can be used in lieu of conducting a Self-Assessment based upon specific performance expectations. This form can be used to generate discussion about general aspects of the job.

Name: _____________________________ Date: _____________________________

Title: ______________________________ Department: _______________________

Review Period: ______________________

Please complete the questions listed below and return to your supervisor prior to your performance evaluation. As you complete the form, consider your own personal performance as it relates to your current job description and expectations for the review period.

1. Do you understand the requirements of your job?  Yes ___  No ___
   If no, what aspects of your job need clarification?

2. List the expectations for the review period and assess how well you have succeeded in meeting each expectation. Attach a separate sheet if necessary.

3. What changes in duties or priorities did you face during the review period and how did you handle them?

4. What are your strengths (the things you do well) and how do you put them to use in your position?

5. What are your weaknesses (the things you don’t do so well) and how do they impact your job?
6. What would help you enhance your performance (training, equipment, etc.)?

7. What are your expectations for the coming evaluation period?

8. How would you rate your overall performance for this review period?
   Outstanding ___  Exceeds Expectations ___
   Meets Expectations ___  Below Expectations ___
   Unsatisfactory ___