

Performance Review--Self-Review Form

Name: _____ Date: _____

Position Title: _____

1. Position Description

- a. What are your main job responsibilities?

- b. What job responsibilities do you view as most important? Why?

- c. Have there been any special circumstances that have helped or hindered you in doing your job this year? If yes, how did they affect your work, and what were the circumstances?

2. Accomplishments and Strengths

Using the enclosed Performance Review Factors that best apply to your position, rate your performance. Use additional paper if necessary.

3. Areas for Future Improvement

- a. What are some of the things you would like to improve or change within your department?

- b. What would help you to do a better job?

- c. What are your goals for next year and what action will you take to accomplish your goals?

- d. Suggest actions you would like your supervisor to take to help you accomplish your goals

- e. In what areas do you feel additional education, training, development would be beneficial?

4 Relationships

- a. What could your supervisor do to help you do a better job?

- b. How could others in the department help you do a better job?

- c. What could you do to make this department a better place in which to work?

Optional Signature: _____