

## EMPLOYEE SELF-EVALUATION FORM

Name

Date

Department

Position

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Please complete this form as part of the annual performance evaluation process.

***Based on your current job description/work assignments:***

After reviewing the essential functions of your position as noted in your job description, do you have any questions about your job responsibilities and performance expectations?

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What do you consider to be the top three to five priorities of your job as you understand them?

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What relationship(s) do you see between your position and the NWESD mission, vision, values and goals?

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What do you see as your greatest accomplishments or successful efforts during the past year?

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During the past year, what aspect(s) of your work gave you the most satisfaction?

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During the past year, what have you found challenging?

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What activities, classes or trainings have you participated in this year in order to develop yourself professionally?

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In what areas would you like to gain more experience, training, and/or education?

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What suggestions do you have to further enhance collaboration within your work environment?

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What would help you to sustain or improve your performance (amount of work assigned, clearer instructions, clarification of priorities, communication within the office, more feedback from supervisor, etc.)?

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Please make any other comments regarding your job or department/program that you consider important and want to discuss.

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***Please provide year-end status for the current evaluation period Annual Emphasis Goals (Form 5240-F3) and return to your supervisor along with the self-evaluation form.***

***In addition, please develop a draft of Annual Emphasis Goals (Form 5240-F3) that you want to focus on for the upcoming year.***