

**The University of Tennessee Health Science Center
Employee Self-Assessment Form**

Section 1: Staff Member Information

Staff Member Name _____ Personnel ID _____

Supervisor Name _____

Performance Year _____ Date Completed _____

Section 2: Self Assessment

Please attach additional sheets if necessary when answering the following questions:

1. Does your current PDQ adequately describe your principal job duties? If not, in what respects have your position duties changed since your last Performance Review (or the date of last PDQ revision).

2. What were your major achievements in the past year?

3. Who are your primary customers and how well have you served them this past year?

4. What are the areas of your performance (behaviors and results) on which you could improve? Please describe.

5. Are there additional skills or knowledge that would help you more effectively perform your present job or enhance your skill opportunities? If yes, please list.

6. What goals (specific, measurable, action-oriented, results-driven and time-bound) do you expect to accomplish during the next year?

7. In general, what is your opinion of communication within your department and how could it be enhanced?

8. List the subjects you would like to discuss during your annual performance evaluation meeting.

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Section 3: Signatures

Staff Member: _____

Date: _____

Supervisor: _____

Date: _____