**Employee Self Evaluation Form PDF**

**Identifying Information
Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_
Employee ID: \_\_\_\_\_\_\_\_\_\_\_\_\_
Department: \_\_\_\_\_\_\_\_\_\_\_\_\_
Evaluation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Self-Assessment**

* **List personal strengths and how they were utilized:**
* **Identify any weaknesses and plans to address them:**

**Achievements**

* **Describe significant achievements and their impact on the department:**

**Career Development Goals**

* **Short-term Career Goals:**
* **Long-term Career Goals:**

**Training Needs**

* **Training attended this year:**
* **Future training desires:**

**General Comments**

* **Additional comments or concerns:**

**Employee Verification

I verify that the information provided here is accurate.
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**