Self Employee Performance

Evaluation Form

Employee information:					
Name:			_		
Position:					
Department:			_		
Evaluation Date:					
Self-Reflection and Perf	ormance Review:				
1. What were your k	ey accomplishme	nts this evaluation pe	riod?		
2. What challenges	did you face, and	how did you overcom	e them?		
3. Areas for improvement:					
4. Additional skills or training required:					
Evaluation Table:					
Criteria	Self-Rating	Manager's Rating	Comments		
	(1-5)	(1-5)			
Quality of Work					
Timeliness					

Communication Skills

Problem-Solving			
Leadership/Initiative			
Team Collaboration			
Dependability			
Adaptability			
Future Goals and Develor	oment:		
\square Develop new skills.			
☐ Improve current role ef	ficiency.		
☐ Transition to a leadersl	nip position.		
Signature:			
Employee:		<u> </u>	
Evaluator:			