**Restaurant Employee Self Evaluation Form**

**Employee Information**

* **Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Self-Assessment Questions**

1. **Describe your key responsibilities in your current role:**
2. **What accomplishments are you most proud of during this evaluation period?**
3. **Identify any challenges you faced and how you overcame them:**
4. **What areas do you feel need improvement?**
5. **What goals would you like to set for the next evaluation period?**

**Performance Ratings**

| **Performance Area** | **Rating (1–5)** | **Comments** |
| --- | --- | --- |
| **Job Knowledge** |  |  |
| **Communication Skills** |  |  |
| **Time Management** |  |  |
| **Team Collaboration** |  |  |
| **Problem Solving Skills** |  |  |

**Additional Comments
Employee's additional thoughts or feedback:**

**Signature
Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**