



Staff Evaluation & Annual Review

Employee Self-Evaluation

OVERVIEW

This form is optional. The staff member may complete or not complete any of the following sections that are provided for guidance. Please submit the completed form directly to your supervisor. Unless the employee or supervisor directs otherwise, this document will be uploaded into etrieve with the supervisor evaluation form, signed by both the supervisor and employee.

EMPLOYEE NAME

SUPERVISOR NAME

DATE

PRIOR YEAR GOAL REVIEW

1. Goal:

Review:

2. Goal:

Review:

2. Goal:

Review:

ACCOMPLISHMENTS

What accomplishments have you achieved during the review period? (Accomplishments may be described as the results of work, as well as the work itself.)

GROWTH & DEVELOPMENT

In what areas do you feel you have opportunities for improvement or growth?

Are there professional development opportunities you would be interested in?

LOOKING FORWARD

Identify 2–3 goals for the coming year.

1.

2.

3.

In what ways can your supervisor support you going forward?

SELF-REFLECTION

This is an opportunity for open-ended reflection on the past year.