EMPLOYEE SELF EVALUATION

ID Number

Job Title

Date

The following information is requested to help prepare for your performance evaluation. Use the space to comment about your job and your performance. Please return this form to your supervisor prior to your evaluation so the information can be discussed during that meeting. Please respond based on your job experiences during the last year. You may use additional pages if necessary.

1.	List the top three to five highest priorities of your job as you understand them.
2.	List what you consider to be your greatest strengths or accomplishments this year.
3.	Identify the environmental or other factors that impacted your job this past year.
4.	What were your most important efforts this year at collaboration within and outside of the department, division, and LIT?
5.	Complete the following sentence. I believe I make the greatest contribution to the department's and LIT's mission by:
6.	What could your supervisor and co-workers do to help you in your job?

7. How could you perform your tasks more efficiently?

8. In what area would you like to gain more experience, training, or education?

9. What have you participated in to gain professional development?

10. Complete the following sentence. I would like to work in the following areas, or on the following projects or tasks if the opportunity arises:

11. Complete the following sentence. I believe my goals and objectives for the coming year should be:

12. Other suggestions or comments: