

Employee Self Evaluation Form

Employee Name: _____ Position: _____

Department: _____ Date: _____

(Submit this form to the supervisor or the departmental head upon completion)

Answer the following questions about yourself in the spaces provided using the grade scale provided. Please be very honest and sincere in evaluating yourself.

KEY:

E – Very poor D – Below average C – Average B – Above Average A – Very Good

Questions:

1. How can you rate the administrative attitude and support towards employees? _____

2. How do you think your performance has been since the last evaluation? _____

3. What, in your opinion is the importance of your last evaluation? _____

4. What would the following changes, if made, would improve your performance?

Salary adjustment _____ More reviews _____

Administration _____ Departmental changes _____

5. Rate the following areas about your service delivery

Results _____ Team work _____ Salary and benefits _____

Work environment _____ Talent _____

Employee Signature _____ Date _____