

Employee Name: \_\_\_\_\_ Date \_\_\_\_\_  
Classification/Title: \_\_\_\_\_

**CITY OF BILLINGS  
EMPLOYEE SELF-APPRAISAL FORM**

**1. ACCOMPLISHMENTS/ACHIEVEMENTS** – Please list or discuss the most important accomplishments you achieved during the past performance appraisal period. This should relate directly to accomplished goals and objectives. (Attach additional pages if necessary.)

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**2. EMPLOYEE DEVELOPMENT** – Please list or discuss those areas which you believe you can improve upon during the next performance appraisal period. (Attach additional pages if necessary.)

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**3. EDUCATION, TRAINING and STAFF DEVELOPMENT UPDATE** – Please list any job-related courses, seminars, or training you have enrolled in or completed since your last evaluation.

Course Subject	School/Association	Date Begun	Date Completed	Unit Hours	Degree/Certificate

**4. RESOURCE NEEDS** – Please list anything your supervisor or the organization could do to improve your effectiveness in your job. (Consider materials and equipment needs, supervisory/management support and direction, procedural changes, etc.)

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