Please return this completed Self-Evaluation Questionnaire to your supervisor at least three days prior to your performance review.

Name: ……………………………………………………………………. Position: ………………………….………………………..……

Department: …………………………………………………………. Date: ……..……………………….………………………..……

• What do you consider to be your major on-the-job accomplishments since your last review?

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• List your areas of strengths and areas needing improvement.

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• Do you have the resources you need to perform your job? What additional resources or information would be helpful?

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• Are there any changes that could be made to improve your effectiveness?

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• What skills or new knowledge would you like to develop?

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• What can you, your supervisor, or the conference do to improve your performance and increase your overall job satisfaction?

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• How would you assess communication within your department? How well informed are you of the information necessary to perform your duties efficiently? What additional information do you need?

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• What are your long-range career objectives and what are your plans to accomplish these objectives? Objectives may include potential job rotations, promotions, additional job responsibilities, education, and training.

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• What goals would you be interested in working toward between now and the following performance evaluation?

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• How will you measure progress toward these goals?

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• How can you bring added value to this organization?

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 Signature Date