SELF-EVALUATION



Date _____

EMPLOYEE NAME

POSITION

DEPARTMENT

Please complete and return to your supervisor/manager prior to your performance evaluation.

RATING SCALE Check the appropriate rating for each skill outlined using the performance rating given below.					
1	Unsatisfactory	Unacceptable performance, lack of willingness or ability to perform the requirements of the position. If unacceptable performance continues, reassignment or separation may be required.			
2	Below Expectations	Performs in a capable manner but requires improvement, more training and/or closer supervision.			
3	Meets Expectations	Performs duties as required; meets all expected criteria including goals.			
4	Exceeds Expectations	Clearly performs above set criteria; quality and quantity of work consistently beyond expectations.			
5	Outstanding	Exceptional performance over time of duties; significantly exceeds objectives, achieves exceptional results.			

JOB KNOWLEDGE: Knowledge of products, policies and procedures.

Rating:

Do you understand the requirements of your job? If not, what aspects of your job need clarification?

PRODUCTIVITY:	Goals are achieved within established timelines.	Rating:
What were you goals for	r the previous review period? Assess how well you have succeeded in me	eting each goal.
	Accurate, neat, and thorough; exceeds expectations.	Rating:
QUALITY OF WORK:	Accurace, near, and morough, execcus expectations.	

Fourth

PREPARATION:	Develops plan and utilizes time wisely. Anticipates change	es. Rating:			
What changes in duties or priorities did you face during the review period and how did you handle them?					
TEAM WORK:	Willingness to work harmoniously with others.	Rating:			
What are some additional tasks you perform in your department that contribute to the team as a whole?					
CUSTOMER SERVICE:	Promotes strong sense of service. Resolves conflicts.	Rating:			
Describe an instance where you displayed exemplary customer service?					
How would you rate your overall performance for this review period?					

Outstanding

Exceeds Expectations

Meets Expectations

Below Expectations

Unsatisfactory

EMPLOYEE COMMENTS

EMPLOYEE ACKNOWLEDGEMENT

This self-evaluation has been completed to the best of my ability. I understand that my signature indicates agreement with the information disclosed here.

EMPLOYEE SIGNATURE

DATE