

PERFORMANCE EVALUATION QUESTIONNAIRE

	nployee name.					
Evaluation Date:						
ı	Instructions: Please print a hard copy of your responses and return to your supervisor 48 hours prior to your scheduled evaluation.					
1.	What professional work accomplishment during the past year are you proudest of?					
2.	What aspect of your job do you need to improve?					
3.	Is the training you are being offered adequate to be successful in your current position? If not, what specific trainings do you need to be successful?					
4.	What has been the most difficult work issue you have had to deal with this year?					
5.	From your perspective are you working well or very well with (explain on each): A. Your immediate coworkers (those in your unit.)					
	B. Your direct supervisor.					
	C. The department as a whole.					

6.	From your perspective what needs to be improved upon with: A. Your immediate coworkers (those in your unit)					
	B. Your direct supervisor					
	C. The department as a whole					
7.	7. Are there any issues or questions t department or for your position?	hat you feel need t	o be addres	ssed in the		
8.	3. Over the next 12 months, do you had accomplish?	ave any specific go	oals you wo	uld like to		
9.	9. Do you have the resources you need to perform your job? If not, please list any specific accommodations and how that will impact your position.					
10. If you were to rate your overall performance this past year from a 1 (low) to a 5 (high), what would you score yourself?						
	1 2 3 Low Mediu	4 m	5	High		
Please explain why you gave yourself the score above:						