**Annual Performance Evaluation**

**Employee Form**

**Name**       **Position**

**Supervisor**       **Anniversary Date**

**Position Responsibilities: For each of the key responsibilities in the job description, comment on your performance during the past year.**

|  |  |
| --- | --- |
| **1.**       | **Goal** |
| **Comments:**      | Continue Improve  |
| **2.**       |  |
| **Comments:**       | Continue Improve  |
| **3.**       |  |
| **Comments:**       | Continue Improve  |
| **4.**       |  |
| **Comments:**       | Continue Improve  |
| **5.**       |  |
| **Comments:**       | Continue Improve  |
| **Summary comments:**       |

**Key skill requirements: Rate and comment on your level of ability in the areas identified for the position as key skill requirements**

|  |  |
| --- | --- |
|  | **Strong skills Weak skills** |
| **1.** |   |
| **2.** |   |
| **3.** |   |
| **4.** |   |
| **5.** |   |
| **Based on the skill level in the required areas or other aspects of the job not listed above, what training would be beneficial in helping you to perform your job functions better?**       |

**Equipment needs**

**Identify any equipment needed to help you perform your job better:**

**Previous issues**

**Comment below on any of the following issues:**

* **progress made on development issues raised in last year’s performance review**
* **growth through training received during the year**
* **exceptional initiatives implemented during the year**

**On-going issues**

**Comment on the following or any other on-going issues that you would like to have discussed at your review:**

* **issues that have been raised as development needs/opportunities during the year, and/or**
* **other items that you would like to discuss as part of your annual review which are not covered elsewhere on this form**

**Goals for the coming year**

**Employee**

**Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print this completed form and give it to your supervisor.**