

**Annual Self-Assessment and Goal Setting Form**

**FY 2020**

Name:

Department:

Title:

The intent of this self-assessment form is for employees to provide their supervisor with a reflective assessment of their performance over the past year that highlights accomplishments and strengths; recognizes areas of growth and acknowledges challenges; and, if applicable, identifies goals for the next year.

Please submit this completed form to your supervisor prior to your scheduled performance review.

1. Please assess your performance over the past year. Include major accomplishments and demonstrated strengths.

1. Comment on any challenges or barriers that may have prevented you from growing or developing in your current position.

1. How could those challenges or barriers above have been overcome or can be overcome in the future.

1. If your position has leadership or management responsibilities, please identify the top two or three goals for yourself and/or your unit for the coming year and discuss how will you accomplish them.

Other comments:

Employee’s Signature: Date:

PLEASE RETURN TO SUPERVISOR FOR INCLUSION IN YOUR PERFORMANCE EVALUATION