Employee Review Form

Employee Name:
Position:
Department:
Review Period: From:
Supervisor's Name:
1. Employee's Goal(s) for the Year
 What goal(s) did you set for yourself this year? (Examples: professional growth, project achievements, skills development)
Employee's Response:
2. Goal Achievement
 Do you feel you have achieved your goal(s)? Why or why not?
Employee's Response:
3. Areas for Improvement
What area(s) would you like to improve in for the coming year?
Employee's Response:
4. Supervisor Support
How can your supervisor assist you in achieving your goals and improving in the identified areas?
Employee's Response:

5. Supervisor	r's Discussion Points
• Super	rvisor's reflections or discussion points on the employee's goals and areas for improvement:
0	Goal Achievement:
0	Support and Development Plan for the Coming Year:
0	Additional Comments or Suggestions:
6. Next Steps	s & Action Plan
• What	will be the next steps for the employee to work on in the coming year?
0	Employee's Plan:
0	Supervisor's Plan to Support:
NOTES:	
Employee Sig	gnature : Date:
- -	
Supervisor S	ignature: Date: