



SELF-PERFORMANCE APPRAISAL
FORM

Employee Date Employed at WNMU:

Title Date Employed at This Particular Job:

W# Period Evaluated to (mm/dd/yyyy)

Department Evaluation Type: End of Probation Annual

Employee Status: Exempt Non-Exempt

Please fill out this Performance Appraisal Form prior to meeting with your supervisor for your appraisal interview.

I. My primary responsibilities listed in priority are as follows

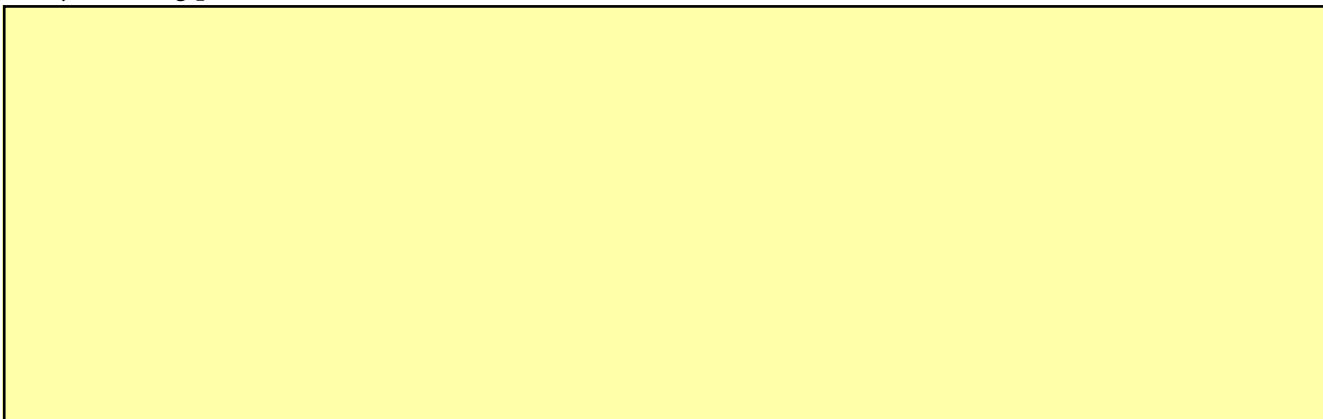
a.

b.

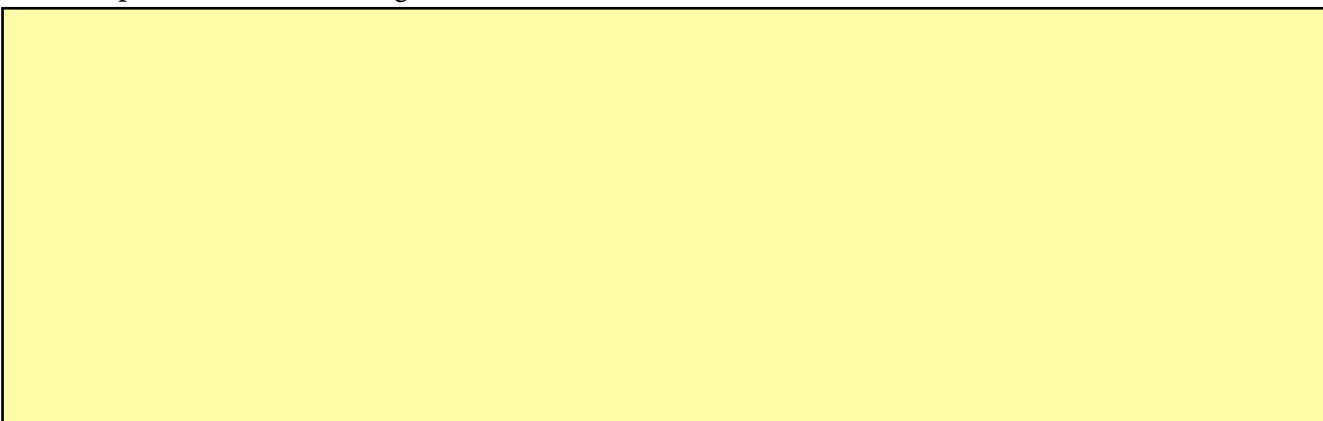
c.

II. I have made the following progress towards establishing my goals and objectives:

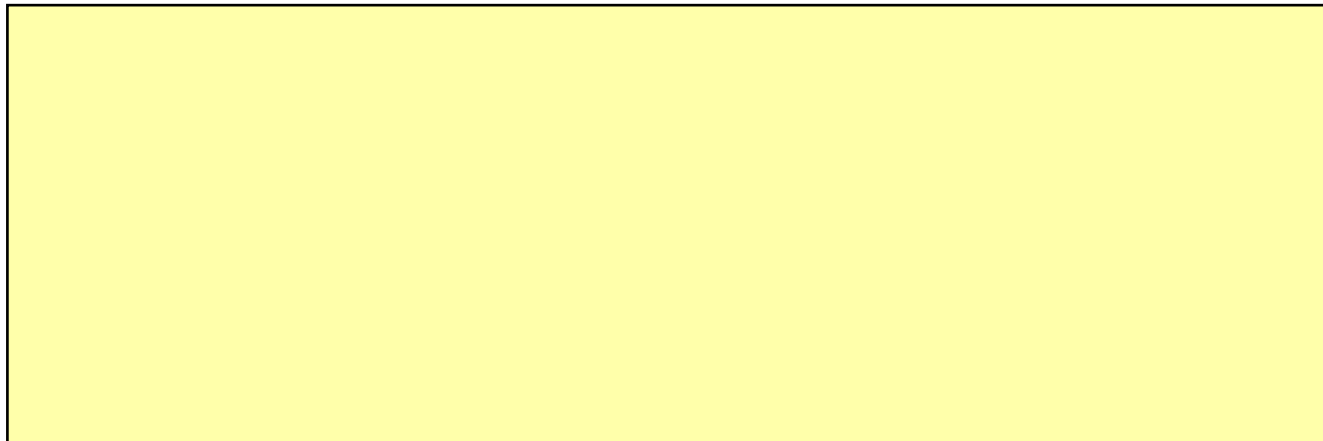
III. My major strong points are:



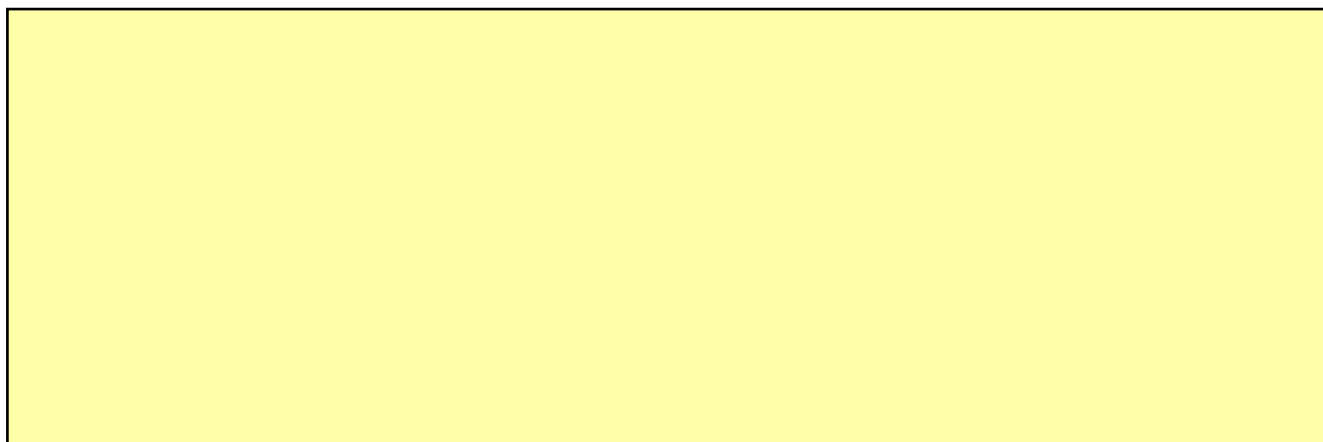
IV. I need to improve on the following areas:



V. Some assistance I might need from my supervisor include



VI. General comments:



VII. The overall evaluation of my job performance is:

Above Average

Average

Need for Improvement

Employee Signature

Date

Reviewed By

Date

Original Copy to Human Resources Office