CONFIDENTIAL

2011 Self-Evaluation Form

NAME:
PRACTICE GROUP AND TEAM:
Law Clerk (Y/N) :
MONTH AND YEAR EMPLOYED:

FINANCIAL INFORMATION

	2009	2010	2011
Billable Hours Goal			
Actual Billable Hours			
Client Development*			
Approved Pro Bono Hours			

*Note: This category does not include Firm Administration, Firm Projects, Community Activity, Administrative Hours, Personal, Seminars/Conventions and Other Miscellaneous Non-chargeable Hours.

1. OFFICE SKILLS 1.1 Analysis/Research 1.2 Oral Expression 1.3 Written Work 1.4 Substantive Legal Knowledge 1.5 Judgment 1.6 Accuracy and Thoroughness 2. BUSINESS DEVELOPMENT 2.1 Ability to work with and retain clients 2.2 Ability to attract new clients 2.3 Potential to generate or enhance business for self or others 3. BILLABLE HOURS 4. PRACTICE MANAGEMENT AND SUPERVISION OF OTHERS 4.1 Timeliness/Productivity 4.2 Independence/Reliability 4.3 Supervisory and Training Experience 5. RELATIONSHIP AND INTERPERSONAL SKILLS 5.1 Ability to work with lawyers 5.2 Ability to work with non-lawyers 5.2 Demonstrates leadership 5.3 Demonstrates leadership 5.4 Reputation outside the firm 5.5 Loyalty to the firm 5.6 Professional manner and demeanor 6. FIRM POLICIES AND COMMUNITY ACTIVITIES 6.1 Contributes to billing and collection efforts 6.2 Participates in firm activities-recruiting, social functions	Please Mark Each Box On The Grid		Performance is Exceptional	Performance is Acceptable	Performance Needs Improvement (specify in comments)	Performance is Unacceptable	No Experience to Evaluate	
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6.3 Participates in community and pro bono activities on behalf of the firm		0.3						

Pleas	se provide any additional comments on the six previous areas:
1.	Lawyering Skills
2.	Business Development
3.	BILLABLE HOURS
4.	PRACTICE MANAGEMENT AND SUPERVISION OF OTHERS
5.	RELATIONSHIPS AND INTERPERSONAL SKILLS. PLEASE IDENTIFY PEERS WITH WHOM YOU'VE WORKED OUTSIDE OF YOUR PRACTICE AREA OR OFFICE.
6.	FIRM POLICIES, COMMUNITY AND PRO BONO ACTIVITIES
1.	DESCRIBE YOUR STRENGTHS OR NOTABLE ACCOMPLISHMENTS.
2.	DESCRIBE AREAS IN WHICH YOU COULD IMPROVE.
3.	Have you attended all scheduled training sessions applicable to you? If not, please explain.
4.	How have you used your cle over the last year to fill a special training need? Please explain.