|  |  |  |  |
| --- | --- | --- | --- |
| Employee name | Click here to enter text. | Evaluation date: | Click here to enter a date. |
| Supervisor name |  | Department: | Choose an item. |

# GOALS AND OBJECTIVES

# ACHIEVEMENTS

# PERFORMANCE

# STRENGTHS AND AREAS FOR DEVELOPMENT

# CAREER DEVELOPMENT PLAN

# GOALS AND OBJECTIVES FOR NEXT EVALUATION PERIOD

# employee SIGNATUREsupervisor signature

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Signature |  |
| Name | [Employee name] | Name | [Supervisor name] |
| Date | [End date] | Date | [End date] |