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Officer of Administration

Performance Evaluation Form

***Self-Assessment***

**Office of Human Resources**

**University of Oregon
Officer of Administration Self-Assessment Form**
**Employee Name: Date:

Department: Position Title:**

**Supervisor Name:**

Please complete this form and return it to your supervisor two weeks prior to your review discussion.

1. **Performance Highlights:** List your most noteworthy accomplishments and contributions of the past year.

2. **Strengths:**  Please review the responsibilities for your position and identify your strengths in accomplishing them, giving specific examples from this performance period.

3. **Performance Challenges:** List any goals that you did not meet and any other performance challenges you experienced this past year. Please explain the circumstances and any steps that were taken to address those challenges.

4.    **Opportunities for Development:**  Please review the responsibilities for your position and identify the areas you would like to prioritize for professional development.  Please include proposals for training.

5.   **Goals:**  Please indicate your preliminary goals (in your current position) for the coming performance review period.

6. **Other Comments** (Optional):