

Professional Employee Self Evaluation

Geneseo

STATE UNIVERSITY OF NEW YORK
COLLEGE AT GENESEO

Name: _____

Evaluation Period _____ to _____
(date) (date)

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Use of this form is voluntary. It is provided to give professional employees input into their annual evaluation. Areas to address may include:

- how you have succeeded in carrying out your assigned duties and responsibilities as outline in your performance program;
- where you have performed particularly well and why;
- where you could have performed more effectively and how;
- goals for the next evaluation period and a plan for accomplishing them.

This form should be completed and discussed with your supervisor at a mutually convenient time shortly after you receive notification that your evaluation is due. It may be attached to your annual **PERFORMANCE EVALUATION**.

Signature: _____

Date: _____