



# Employee Performance Review

## Goals and Objectives

Employee's Name		Title	
Supervisor's Name		Title	
Department	Review Date	<input type="checkbox"/> Annual <input type="checkbox"/> Probationary	<input type="checkbox"/> Self Evaluation <input type="checkbox"/> Supervisor's Evaluation

**Must be completed in ink. Attach additional pages, if needed.**

**Employee Goals and Objectives for the next year (list goal, desired outcome and timeframe for completion of goal):**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**List of Professional Development Activities for the next year:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_