

# UCSB EMPLOYEE SELF-ASSESSMENT

Please complete this form and provide it to your supervisor prior to your annual performance evaluation discussion.

**SECTION ONE: EMPLOYEE INFORMATION**

Employee Name:	Job Title:	Department:
Supervisor's Name:	Supervisor's Title:	
Period Covered By This Self-Assessment (dates): From: _____ To: _____		
Length of Time in Position: Years: _____ Months: _____		

**SECTION TWO: SUMMARY OF KEY ACCOMPLISHMENTS FOR THE PERFORMANCE YEAR**

Summarize your major accomplishments for this performance review period. If applicable, you may attach supporting documentation. Major accomplishments could include the following:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>✓ Significant assignments and projects you completed</li> <li>✓ Training completed</li> <li>✓ Goals accomplished and other significant work outcomes</li> <li>✓ Areas of excellence in a job responsibility</li> </ul> | <ul style="list-style-type: none"> <li>✓ Performance of new responsibilities</li> <li>✓ Personal and professional development</li> <li>✓ Innovative ideas incorporated</li> <li>✓ High performance areas in a job responsibility</li> </ul> |
|---|---|

ACCOMPLISHMENTS	Indicate the corresponding job responsibility or performance year goal (if applicable)

### **SECTION THREE: UC CORE COMPETENCIES**

**PART A:** Check the competencies below that were the most critical and that you successfully demonstrated this performance year. You may also add comments and examples. The UC Core Competencies are a part of measuring job performance. A description of each competency with corresponding individual behavioral indicators can be found at <http://www.hr.ucsb.edu/current-employees/managing-my-performance>

<b>DEMONSTRATED UC CORE COMPETENCIES</b> (Check all competencies that apply for this performance year)	<b>Provide comments and examples for the competencies that you have successfully demonstrated</b>
<input type="checkbox"/> Communication	
<input type="checkbox"/> Diversity & Inclusion	
<input type="checkbox"/> Employee Engagement	
<input type="checkbox"/> Innovation & Change Management	
<input type="checkbox"/> Job Mastery & Continuous Learning	
<input type="checkbox"/> Resource Management	
<input type="checkbox"/> Results Orientation & Execution	
<input type="checkbox"/> Service Focus	
<input type="checkbox"/> Teamwork & Collaboration	
<input type="checkbox"/> People Management (for Managers & Supervisors)	

**PART B:** Check the competencies below that you think are important for your position but for which you would like additional experience, training, and career development opportunities.

<b>UC CORE COMPETENCIES – DEVELOPMENT NEEDED</b> (Check all competencies that apply)	<b>Provide comments and ideas for mastery of the competency (such as coaching, additional responsibilities to develop the competency, training classes, or enhancement of specific professional/industry skills)</b>
<input type="checkbox"/> Communication	
<input type="checkbox"/> Diversity & Inclusion	
<input type="checkbox"/> Employee Engagement	
<input type="checkbox"/> Innovation & Change Management	
<input type="checkbox"/> Job Mastery & Continuous Learning	

<input type="checkbox"/> Resource Management	
<input type="checkbox"/> Results Orientation & Execution	
<input type="checkbox"/> Service Focus	
<input type="checkbox"/> Teamwork & Collaboration	
<input type="checkbox"/> People Management (for Managers & Supervisors)	

#### **SECTION FOUR: ADDITIONAL QUESTIONS TO CONSIDER**

Consider the following questions in preparation for the performance evaluation discussion with your supervisor. You may record your responses below to some or all of the questions. Or, you can discuss them with your supervisor during your evaluation meeting.

<b>ADDITIONAL QUESTIONS TO CONSIDER</b> (Record your answers in the column to the right)	<b>COMMENTS AND EXAMPLES</b>
What one or two key goals would you like your supervisor to consider for the next performance year?	
What aspects of your job do you like the <b>best</b> ? Why?	
What aspects of your job do you like the <b>least</b> ? Why?	
What job constraints or other issues influenced your work performance or accomplishment of goals this year? (Please comment on ideas for improvement that you would like your supervisor to consider)	
What other changes would you like your supervisor to consider that could improve your job effectiveness? (Also comment on any ideas that you can help incorporate)	
What specific things do you plan to do during the next performance year for your own development?	
Consider how well your abilities are being used in your current position. Are there additional responsibilities and/or tasks that you think would make better use of your talents and capabilities?	
What can your supervisor do to help you be more effective and successful in your job?	
What other things would you like to speak with your supervisor about during your performance review? (This could include your long term goals)	

**SECTION FIVE: DOCUMENTATION AND SIGNATURES**

Check here if you would like this self-assessment to be included in your personnel file.

Check here if you have included any supporting documentation.

Employee signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor signature \_\_\_\_\_ Date: \_\_\_\_\_

**The employee and supervisor signatures indicate that this document was reviewed and discussed during the annual performance review.**