

## APPENDIX A

### SCCDAA Administrator –Self Evaluation Form

#### EMPLOYEE INFORMATION

Employee Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
Working Title: \_\_\_\_\_  
Department/School: \_\_\_\_\_ Number of direct reports: \_\_\_\_\_  
Date of Last Evaluation: \_\_\_\_\_  
MM/DD/YYYY  
Evaluation Period for this Performance Evaluation: \_\_\_\_\_  
Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
MM/DD/YYYY MM/DD/YYYY

#### SECTION I: ACCOMPLISHMENTS

Identify noteworthy accomplishments from this evaluation period. Please provide contextual information relating to previous year's goals, evaluate your status and progress toward each goal, and explain how each goal was met/not met.

Accomplishment 1:	
Narrative: box will expand	
Accomplishment 2:	
Narrative: box will expand	
Accomplishment 3:	
Narrative: box will expand	
Accomplishment 4:	
Narrative: box will expand	

#### SECTION II: GOALS

**FUTURE GOALS:** Identify up to four (4) goals or performance objectives you aim to complete during the next review cycle prior to the next performance evaluation.

Future Goal 1:	
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**Narrative:** *box will expand*

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**Narrative:** *box will expand*

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**Narrative:** *box will expand*

**Narrative:** *box will expand*

### SECTION III: SUMMARY OF PERFORMANCE

*Provide a narrative below that describes your performance during this evaluation period. Include goals achieved (if not achieved, explain why), accomplishments, and specific examples of performance (identify the skills and strengths that contributed to your achievements). Narrative may include performance on topics such as: leadership skills, communication, quantity/quality of work (Use metrics and data to quantify your success where possible), interpersonal skills, professionalism, job knowledge, collaboration, etc. Be honest about any challenges or weaknesses; Discuss what you could have done differently and how you plan to improve. Recommendations on items such as professional development and best practices may also be included here.*

**Narrative of Performance for this Evaluation Period:**