

## PERFORMANCE REVIEW – EMPLOYEE INPUT

**Name:** \_\_\_\_\_ **Position:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

TO BE COMPLETED BY THE EMPLOYEE AND REVIEWED WITH SUPERVISOR

Considering your position description, the departmental mission and individual plan of work, complete the questions below.

### I. KEY ACCOMPLISHMENTS

Please list your key accomplishments and their impact on Calvin College and/or your department and those you serve (students, alumni, faculty, staff, etc.).

### II. ADDITIONAL QUESTIONS

Please address each of the following questions with a brief written response:

- a. Have you participated in any professional development and/or campus activities this year? Please list.
  
  
  
  
  
  
  
  
  
  
- b. Have you encountered any obstacles this year that have affected your performance? If so, have these obstacles been addressed and/or resolved?
  
  
  
  
  
  
  
  
  
  
- c. Is there anything that your supervisor could do to help you be more successful? If so, what is it? What could the college, your division or department do to provide a more supportive work environment?

### III. LOOKING FORWARD

In preparation for the year ahead, please answer the questions below.

- a. What development goals would you recommend for yourself for next year? Please consider development goals as they pertain to your professional development, organizational involvement, and [\*FEN-related activities\*](#).

