

Employee Name: \_\_\_\_\_

Date Hired: \_\_\_\_\_

Date Completed: \_\_\_\_\_

Scheduled update: \_\_\_\_\_  
(2 years)

### **Employee Focus Form**

(Optional)

*This form assists our company in understanding you, and to make your experience with the company as positive as possible. Any and all questions on this form are optional. You do not need to answer any or all of the questions. The information provided will remain confidential, as a part of your personnel file, and will only be shared with your supervisor, Human Resources, and upper management. Please only provide information that you want shared with the above mentioned people.*

1. Goals:

- a. What are your career goals, advancement goals (if any)?

\_\_\_\_\_

- b. What would you like our company to do to assist you in your goals?

\_\_\_\_\_

- c. What are you doing, or plan to do, to achieve your goals?

\_\_\_\_\_

- d. What are your personal goals?

\_\_\_\_\_

- e. What can our company do to assist you in attaining your personal goals?

\_\_\_\_\_

2. Pride:

- a. What are you most proud of – professionally / personally?

\_\_\_\_\_

3. Training:

- a. What training have you received prior to joining our company?

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- b. What training would you like to receive either inside or outside of our company? Training can include, but is not limited to, job training, business training, skills, and personal development.

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- c. Are there any areas that you can provide training to the rest of our company?

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4. Education:

- a. What education do you have that we may not be aware of?

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- b. Are you interested in furthering your education? If so, please describe.

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5. Skills:

- a. What is your single, greatest skill or strength?

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- b. Do you have certain skills that we should be aware of? Please describe?

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- c. Do you have certain skills that you would like to improve upon? Please describe?

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6. Motivation:

- a. What motivates you?

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- b. What de-motivates you?

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- c. What else should your manager know about motivating you?

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7. Management:

- a. What management style do you respond best to?

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- b. What management style do you least respect?

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- c. Do you prefer to work independently, as a member of a team, or as a leader of a team?

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8. Obstacles:

- a. Are there any obstacles, within our company, that are preventing you from meeting your goals and/or fully enjoying your employment here?

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- b. Are there any obstacles outside of our company preventing you from meeting your goals and/or fully enjoying your employment here?

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9. Needs:

- a. Describe any special equipment you might find helpful in your work space?

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- b. Describe any other special needs you may have.

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10. Suggestions:

- a. What suggestions do you have for your supervisor and/or our company to assist us in becoming a better company or to specifically help you?

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- b. Please provide any other comments you may have.

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