| **SELF APPRAISAL FORM**  NAME: DESIGNATION :  GRADE: REVIEW PERIOD: |
| --- |

I Please be precise and crisp in filling up the form:

1. What are the major responsibilities you undertook during the review period?

|  |
| --- |

1. What were your major achievements during the review period?

|  |
| --- |

3. What were the additional responsibilities you took apart from your major assignment?

|  |
| --- |

1. What factors hindered you from achieving maximum performance level?

|  |
| --- |

1. Under what conditions would you be more productive and effective?

|  |
| --- |

1. Your strengths?

|  |
| --- |

1. Your weaknesses?

|  |
| --- |

1. What kind of training do you think you would require from the company?

|  |
| --- |

1. Do you think you can shoulder additional responsibilities? If yes, in what areas?

|  |
| --- |

1. Do you have any suggestions for the improvement of the work environment such as infrastructure, reporting system etc.?

|  |
| --- |

II

How would you rate yourself on the following factors on a scale of 1 to 5 (Low to High)

FACTORS RATING



ATTENDANCE & DISCIPLINE



2. KNOWLEDGE & SKILLS



1. QUALITY OF WORK & PRODUCTIVITY



1. CREATIVITY & INITIATIVE



1. INTERPERSONAL SKILLS



1. PLANNING & ORGANIZING SKILLS



1. COMMUNICATION



1. COST CONSCIOUSNESS & SAVING



1. REPORTING AND DOCUMENTATION



1. LEADERSHIP

III

How would you rate yourself on the following Technical factors on a scale of 1 to 5 (Low to High)

FACTORS RATING



1. UNDERSTANDING



2. ANALYZING



3. CODING \*



4. DEBUGGING \*



5. SCREEN DESIGN \*



6. MEETING SCHEDULE



7. QUALITY OF WORK



8. REPORTING AND DOCUMENTATION

**SIGNATURE:**

**DATE:**

\* To be filled if applicable.