



Job Performance Wheel

Name: _____

Position: _____

Organization: _____

Telephone: _____

E-mail: _____

INSTRUCTIONS: Score your sense of satisfaction with the aspects of your job performance labeled above. You may replace any of the labels with labels you believe are more appropriate for you. Use a scale of 0 to 10 to assess your performance. Identify areas you wish to improve. Determine what actions you will take to improve your scores.

