



FY25 EMPLOYEE SELF - ASSESSMENT

Completion of this form is **optional**.

Questions? Call 361-826-3300 or email Workforce
Developmentt Specialist at performancereviews@cctexas.com

Submit completed form to your
supervisor no later than
10/17/2025.

**SUPERVISOR, PLEASE RETURN WITH EMPLOYEE'S
ANNUAL PERFORMANCE EVALUATION**

EMPLOYEES ARE ENCOURAGED TO KEEP A COPY
FOR THEIR RECORDS

EMPLOYEE INFORMATION

Full Name _____

Employee ID _____

Job Title _____

Department _____

1. List what you believe the key elements of your job were during the past year.

2. What were your major accomplishments for the past year?

3. What training and development activities did you complete during the year?



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4. What were your major challenges to accomplishing your goals/job responsibilities?

5. What do you believe your key goals should be for next year?

6. What do you need to allow you to attain those goals?

7. Other Comments:

Employee Signature _____

Date: _____