

UAMS Resource Nursing Program



Applicant Self Evaluation

Name of Applicant Being Reviewed: _____

Workday ID: _____

Date: _____

Review Guidelines

Complete this self-evaluation, using the following scale:

1 = Unacceptable; 2 = Needs Improvement; 3 = Meets Expectations; 4 = Exceeds Expectations; 5 = Outstanding

Peer Evaluation					
Instructions: place a check in one column per row.					
	(1) Unacceptable	(2) Needs Improvement	(3) Meets Expectations	(4) Exceeds Expectations	(5) Outstanding
Effective communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accountable to Assigned Responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to learn and use new skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honors Commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to successfully problem solve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to coach peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generates Creative Ideas and Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates Innovative Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide additional comments for scores of "1" and/or "5":

Applicant Signature/Title

Date: