**Goal Sheet**

 Employee Name:

 Department:

 Employee Position:

 Supervisor Name:

 Supervisor Title:

 Today’s Date:

 Goal Completion Date:

**GOALS**

 Goal #1:

 Goal #2:

 Goal #3:

 Goal #4:

 Goal #5:

**Goal Notes**

 Employee Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_