

PERFORMANCE EVALUATION

EMPLOYEE INFO			
EMPLOYEE NAME		DEPARTMENT	
EMPLOYEE ID		REVIEWER NAME	
POSITION HELD		REVIEWER TITLE	
LAST REVIEW DATE		TODAY'S DATE	

CHARACTERISTICS

QUALITY	UNSATISFACTORY	SATISFACTORY	GOOD	EXCELLENT
---------	----------------	--------------	------	-----------

Works to Full Potential				
Quality of Work				
Work Consistency				
Communication				
Independent Work				
Takes Initiative				
Group Work				
Productivity				
Creativity				
Honesty				
Integrity				
Coworker Relations				
Client Relations				
Technical Skills				
Dependability				
Punctuality				
Attendance				

GOALS			
ACHIEVED GOALS SET IN PREVIOUS REVIEW?			
GOALS FOR NEXT REVIEW PERIOD			
COMMENTS AND APPROVAL			
COMMENTS			
EMPLOYEE SIGNATURE		REVIEWER SIGNATURE	