Employee Performance Review

**Employee Information**

**Employee Name: Date:**

**Department: Period of Review:**

**Reviewer: Reviewers Title:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Performance Evaluation | Excellent | Good | Fair  | Poor | Comments |
| Job Knowledge |  |  |  |  |  |
| Productivity |  |  |  |  |  |
| Work Quality |  |  |  |  |  |
| Technical Skills |  |  |  |  |  |
| Work Consistency |  |  |  |  |  |
| Enthusiasm |  |  |  |  |  |
| Cooperation |  |  |  |  |  |
| Attitude |  |  |  |  |  |
| Initiative |  |  |  |  |  |
| Work Relations |  |  |  |  |  |
| Creativity |  |  |  |  |  |
| Punctuality |  |  |  |  |  |
| Attendance |  |  |  |  |  |
| Dependability |  |  |  |  |  |
| Communication Skills |  |  |  |  |  |
| Overall Rating |  |  |  |  |  |
| Opportunities for Development |
|  |
|  |
|  |
| Reviewers Comments |
|  |
|  |
|  |
|  |

By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this performance evaluation.

**Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reviewers Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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