

Employee Performance Evaluation Form

Employee Name	Date of Hire
Job Title/Department	[Manager/Supervisor]
Date of Appraisal	Review Period

[1. Self-Assessment and Summary of Accomplishments

Instructions: This section should be completed by the employee and returned to the employee's [manager/supervisor].

[Which of the goals that you and your [manager/supervisor] set in your previous review meeting did you meet in the past [TIME FRAME]? Which goals did you not meet and why?

Please describe any successes you have had in the past [TIME FRAME] and explain what, if anything, you learned from these experiences.

Please describe any challenges you have faced in the past [TIME FRAME] and explain if and how you overcame them. What could [EMPLOYER NAME] have done to help redress these issues?

[[ADDITIONAL JOB-SPECIFIC QUESTION[S]]

2. Performance Ratings

Instructions: This section should be completed by the [manager/supervisor]. Using the rating key below, describe the employee's performance in each of the listed performance categories, referring to the examples listed in each category that are relevant to the employee's position. **For each category, include specific, detailed examples illustrating your rating.**

- **Exceeds expectations (3):** Consistently exceeds expectations.
- **Meets expectations (2):** Meets all relevant performance standards.
- **Needs improvement (1):** Consistently underperforms in role.
- **No basis (N/A):** Insufficient opportunity to observe or not relevant to the job.

Job Knowledge	1	2	3	N/A
Understands company products, policies and procedures; has appropriate technical/IT skills, analytical skills and problem-solving skills; proficient in area(s) of expertise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				
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Communication Skills	1	2	3	N/A
Has appropriate verbal and written communication skills, including, for example, presentation skills, listening skills and customer service skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				
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Productivity and Quality of Work	1	2	3	N/A
Completes all assignments; performs work according to current guidelines and directives; pays attention to detail; produces work that matches expectations; produces work that is organized, presented professionally, thorough, complete, accurate and free of errors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				
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Adaptability	1	2	3	N/A
Willingly accepts a variety of responsibilities; adapts to new situations in a positive manner; displays openness to learning and applying new skills; is resourceful; generally seeks work process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

improvements.

Comments:

Professional Demeanor	1	2	3	N/A
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Maintains professional appearance appropriate to the job; exhibits sound judgment; maintains a high level of character and professional attitude; has positive relationships with managers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments:

Initiative and Creativity	1	2	3	N/A
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Plans work and accomplishes tasks effectively and of own accord; acts independently while keeping [manager/supervisor] informed; makes constructive suggestions; continually looks for ways to improve and promote quality; looks for opportunities to take on more responsibility; actively seeks performance feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments:

Time Management and Reliability	1	2	3	N/A
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Consistently meets deadlines; is punctual and can be relied on for planning purposes; displays effective planning and organizational skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments:

Interpersonal Skills	1	2	3	N/A
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Works well with others to achieve company's goals; accepts constructive criticism; reacts positively to instructions and procedures; effectively resolves conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments:

[Leadership	1	2	3	N/A
Provides clear direction and purpose; models ethical workplace behavior; sets clear goals; empowers employees to achieve objectives; motivates, mentors and develops employees; displays effective decision-making skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				

_____]				

[Management	1	2	3	N/A
Maintains a safe and healthy work environment; organizes and distributes work effectively; communicates behavioral expectations and performance standards; monitors, documents and evaluates employee conduct and performance; provides appropriate and timely feedback; builds a team that reflects high morale, clear focus and group identity; encourages and provides opportunities for employee growth; promotes equal opportunity; protects the rights of all employees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				

_____]				

[[ADDITIONAL JOB-SPECIFIC PERFORMANCE INDICATOR]	1	2	3	N/A
[ADDITIONAL JOB-SPECIFIC EXAMPLES]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments:</i>				

_____]				

3. Goals

Instructions: This section should be completed by the [manager/supervisor] with the employee's input during the performance review meeting.

4. Training and Development Needs

Instructions: This section should be completed by the [manager/supervisor] with the employee's input during the performance review meeting.

5. Employee Comments

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

[EMPLOYEE NAME]

Date

[MANAGER OR SUPERVISOR NAME]

Date