EMPLOYEE PERFORMANCE REVIEW

Employee Information							
Employee Name: Department:				Date:			
				Period of Review:			
Reviewer:				Reviewers Title:			
Performance Evaluation	Excellent	Good	Fair	Poor		Comments	
Job Knowledge							
Productivity							
Work Quality							
Technical Skills							
Work Consistency							
Enthusiasm							
Coorporation							
Attitude							
Initiative							
Work Relations							
Creativity							
Punctuality							
Attendance							
Dependability							
Communicaton Skills							
Overall Rating							
Opportunities for Developmen	t						
Reviewers Comments							
By signing this form, you confirm necessarily indicate that you agr Employee Signature			evaluation.	n detail with yo		sor. Signign this form does	s not