# Employee Performance Review

#### Employee Information

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| --- | --- | --- | --- |
| **Employee Name** |  | **Employee ID** |  |
| **Job Title** |  | **Date** |  |
| **Department** |  | **Manager** |  |
| **Review period** |  |  |

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| --- |
| Ratings |
|  | 1 = Poor | 2 = Fair | 3 = Satisfactory | 4 = Good | 5 = Excellent |
| Job Knowledge | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Work Quality | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Attendance/Punctuality | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Productivity | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Communication/Listening Skills | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Dependability | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Comments |  |
| Overall Rating (average the rating numbers above) |  |

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| Evaluation |
| **Additional Comments** |  |
| **Employee Goals** |  |

#### Verification of Review

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| 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 evaluation. |
| **Employee Signature** |  | **Date** |  |
| **Manager Signature** |  | **Date** |  |