Employee Name Date \_\_\_\_\_\_\_\_

**Employee Performance Review**

Position \_ Department \_\_\_\_\_\_\_\_\_\_

**Part 1:** Circle the number that best represents employee’s performance for each item.

1. **Quality/accuracy of work**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Quantity of work**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Dependability**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Attendance/Punctuality**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Professional communication skills with co-workers/supervisors**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Customer-focused communication skills**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Ability to work as a member of a team; teamwork**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Ability to work independently**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Open to feedback**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Willingness to take on additional responsibilities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Complies with company policies and procedures**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Exhibits effective problem solving skills**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Eagerness to learn new job-related skills**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Asks questions and seeks guidance as needed**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

1. **Makes progress toward professional development goals**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| Deficient | Below Standard | Meets Expectations | Above Standard | Outstanding |

**Part 2:** Explanation/description of concerns regarding any items with scores of 1 or 2, along with plans for making necessary improvements. Enter N/A for any items with scores of 3 or higher.

|  |  |
| --- | --- |
| Item | Concerns: |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |
| 10 |  |
| 11 |  |
| 12 |  |
| 13 |  |
| 14 |  |
| 15 |  |

**Part 3:** Developmental Goals: Agree on and list 3 - 5 developmental goals for next review period. 1.

2.

3.

4.

5.

**Part 4:** Training Needs**:** List any specific training needed to improve job performance or make progress toward achieving agreed-upon developmental goals.

**Part 5:** Employee comments

# Completed by:

Employee Name (Please Print) Signature Date

Supervisor Name (Please Print) Signature Date

HR Representative (Please Print) Signature Date