

(Manager to Complete)

Employee Name: _____ Department: _____

Current Date: _____ Date of Employment: _____

Title: _____

Current Evaluation Period: From: _____ To: _____

Current Evaluator Name/Title: _____

Work Performance

Work Performance	1. Unacceptable 3. Good	2. Fair 4. Superior
Client Service Skills	Comments	1 2 3 4
The ability to develop client relationships by making an effort to listen to and understand the client. The ability to anticipate and provide solutions to client needs and give high priority to client satisfaction.		
Team Work Skills	Comments	1 2 3 4
The ability to develop relationships with co-workers and to contribute to group solutions. The effort put forward to making our company a better place to work for everyone.		
Quality of Work	Comments	1 2 3 4
The value of work produced by the employee and the thoroughness, accuracy, neatness, and acceptability of the work completed. Ability to work under pressure and learn from previous mistakes. Accurately checking processes and tasks and handling issues in a timely manner.		
Quantity of Work	Comments	1 2 3 4
The quantity of work produced by the employee and accuracy and acceptability of the work completed. The ability to work at quick rates of speed, under pressure, while producing accurate outcomes.		
Judgment and Decision Making	Comments	1 2 3 4
The ability to think logically and practically before making decisions. Use of independent thought, originality, and reasoning. Ability to prioritize work and timely implementation of workable solutions to problem. The ability to handle confidential information.		