

# Employee Performance Review Evaluation Form

## Employee Information

Employee Name

Position / Title

Department

Review Period

Date of Review

## Performance Criteria

Criteria	Rating (1 - 5)	Comments
Quality of Work	<input type="text"/>	<input type="text"/>
Productivity	<input type="text"/>	<input type="text"/>
Initiative	<input type="text"/>	<input type="text"/>
Communication	<input type="text"/>	<input type="text"/>
Teamwork	<input type="text"/>	<input type="text"/>

## Overall Comments

## Goals for Next Review Period

## Signatures

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Employee Signature

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Reviewer Signature

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Date