

Staff Performance Assessment Form

Employee Information

Full Name

Position/Title

Department

Assessment Period

Date of Assessment

Performance Criteria

Criteria	Rating (1-5)	Comments
Job Knowledge	<input type="text"/>	<input type="text"/>
Quality of Work	<input type="text"/>	<input type="text"/>
Punctuality & Attendance	<input type="text"/>	<input type="text"/>
Communication Skills	<input type="text"/>	<input type="text"/>
Teamwork	<input type="text"/>	<input type="text"/>

Strengths

Areas for Improvement

Goals for Next Period

Evaluator Name

Evaluator Signature

Date

Employee Signature

Date