

# Team Member Performance Appraisal

## Employee Information

Name

Position

Department

Appraisal Period

Reviewer

Date

## Performance Criteria

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

## Achievements

Areas for Improvement

Goals and Development Plan

Additional Comments

Signatures

Employee Signature

Date

Reviewer Signature

Date