

Basic Performance Evaluation Assessment Form

Employee Information

Employee Name

Position/Title

Department

Evaluation Date

Performance Criteria

Criteria	Rating (1-5)	Comments
Quality of Work	<div></div>	<div></div>
Productivity	<div></div>	<div></div>
Communication	<div></div>	<div></div>
Teamwork	<div></div>	<div></div>
Reliability	<div></div>	<div></div>

Overall Comments

Evaluator Information

Evaluator Name

Title

Signature

Date