

Job Performance Review Assessment Sheet

Employee Information

Employee Name

Job Title

Department

Supervisor

Review Period

e.g. Jan 2024 - Jun 2024

Assessment Criteria

Criteria	Description	Rating (1-5)
Quality of Work	Accuracy, thoroughness, and effectiveness of work	<input type="text"/>
Productivity	Amount and efficiency of work completed	<input type="text"/>
Communication	Clarity in verbal and written interactions	<input type="text"/>
Dependability	Consistency, reliability, and punctuality	<input type="text"/>
Initiative	Willingness to take charge and go beyond assigned tasks	<input type="text"/>

Strengths and Achievements

Areas for Improvement

Development Goals

Additional Comments

Employee Signature

Date

Supervisor Signature

Date