

# Staff Evaluation Summary Document

## Employee Information

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Evaluation Period: \_\_\_\_\_

Reviewer: \_\_\_\_\_

## Performance Criteria

| Criteria                 | Rating | Comments |
|--------------------------|--------|----------|
| Quality of Work          |        |          |
| Productivity             |        |          |
| Attendance & Punctuality |        |          |
| Collaboration & Teamwork |        |          |
| Initiative               |        |          |
| Communication Skills     |        |          |

## Strengths

## Areas for Improvement

## Overall Comments

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Employee Signature

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Reviewer Signature

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Date