

Team Member Review Report

Team Member Name:

Position/Role:

Reviewer Name:

Review Period:

Date of Review:

1. Key Responsibilities

2. Performance Assessment

Criteria	Comments	Rating
Quality of Work		
Productivity		
Teamwork		
Communication		
Initiative		

3. Strengths & Achievements

4. Areas for Improvement

5. Goals for Next Period

6. Additional Comments

Reviewer Signature: