



Sales Appraisal Form for Employees

Personal Information

- Employee Name: _____
- ID Number: _____
- Sales Team/Unit: _____
- Evaluation Year: _____

Sales Metrics Evaluation

- Monthly Sales Growth: _____
 - Exceeded
 - Met
 - Below
- Client Retention Rate: _____
 - High
 - Moderate
 - Low
- Revenue Generated: _____
 - Exceeds Expectations
 - Meets Expectations
 - Does Not Meet Expectations

Individual Strengths and Areas for Improvement

- Strengths: _____
- Improvement Areas: _____

Goals for Next Evaluation Period: _____

Signatures:

- Employee: _____ Date: _____



- **Reviewing Officer:** _____ **Date:** _____