

Peer Evaluation Form PDF

Evaluator Information:

- Name: _____
- Position: _____
- Department: _____

Employee Being Evaluated:

- Name: _____
- Position: _____
- Department: _____

Evaluation Sections:

Performance Assessment:

- Work Quality: [Checkbox] Exceeds Expectations [Checkbox] Meets Expectations [Checkbox] Needs Improvement
- Comments: _____
- Team Collaboration: [Checkbox] Exceeds Expectations [Checkbox] Meets Expectations [Checkbox] Needs Improvement
- Comments: _____

Overall Performance Rating:

- Rating: _____
- Evaluator's Final Comments: _____

Signature:

- **Evaluator's Signature:** _____
- **Date:** _____