

Peer Review Form for Employee

Employee Information

Name: _____

Department: _____

Role/Position: _____

Reviewer Information

Name: _____

Position: _____

Review Date: _____

Performance Evaluation

1. Job Knowledge

Comments: _____

2. Communication Skills

Comments: _____

3. Team Collaboration

Comments: _____

4. Problem-Solving Ability

Comments: _____

5. Punctuality and Attendance

Comments: _____

Overall Performance

Outstanding

Satisfactory

Needs Improvement

Additional Feedback

Strengths Observed: _____

Areas for Improvement: _____

Suggestions for Growth: _____

Reviewer Signature

Signature: _____ **Date:** _____