Candidate Resume Evaluation Form

Candi	date Information:		
Full N	ame:		
	on Applied For:		
Date o	of Review:		
Revie	wer Name:		
Evalu	ation Criteria:		
1.	Personal Details:		
•	Completeness: ☐ Yes ☐ No		
•	Relevance to Position: \square Yes \square No		
2.	Professional Summary:		
•	Clarity and Conciseness: \square Yes \square No		
•	Highlights Key Skills: \square Yes \square No		
3.	Work Experience:		
•	Relevant Experience: \square Yes \square No		
•	Achievements Listed: \square Yes \square No		
4.	Skills and Competencies:		
•	Technical Skills:		
•	Soft Skills:		
5.	Overall Impression:		
	Strengths:		
	Areas for Improvement:		
Revie	wer Comments:		