

# Employee Job Performance Appraisal Form

## Employee Details

- Full Name: \_\_\_\_\_
- Employee ID: \_\_\_\_\_
- Position: \_\_\_\_\_
- Department: \_\_\_\_\_
- Manager: \_\_\_\_\_
- Evaluation Period: \_\_\_\_\_

## Performance Ratings

Rate the employee's performance using the scale below:

Criteria	Unsatisfactory (1)	Needs Improvement (2)	Meets Expectations (3)	Exceeds Expectations (4)	Outstanding (5)	Comments
Work Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Attendance & Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Teamwork & Collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Communication &amp; Interpersonal Skills</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Customer Service Skills</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Performance Summary**

- **Strengths:** \_\_\_\_\_
- **Areas for Development:**  
\_\_\_\_\_
- **Training Needs:** \_\_\_\_\_
- **Goals for Next Period:** \_\_\_\_\_

**Approval Section**

- **Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_
- **Manager's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_