Employee Performance Review Form

Employee Information

| ٠ | Name: | | | | | |
|------------------|------------------------|--|--|--|--|--|
| • | Employee ID: | | | | | |
| • | Department: | | | | | |
| • | Job Title: | | | | | |
| • | Review Period: From To | | | | | |
| Reviewer Details | | | | | | |
| • | Reviewer's Name: | | | | | |
| • | Designation: | | | | | |
| • | Date of Review: | | | | | |

Performance Criteria

(Use the scale: 1 - Poor, 2 - Needs Improvement, 3 - Satisfactory, 4 - Good, 5 - Excellent)

| Criteria | Rating (1-5) | Comments | Action Plan |
|---------------------------|--------------|----------|-------------|
| Job Knowledge & Skills | | | |
| Work Quality & Accuracy | | | |
| Productivity & Efficiency | | | |
| Communication Skills | | | |
| Team Collaboration | | | |
| Problem-Solving | | | |

| Adaptability & Initiative | | |
|---------------------------|--|--|
| Leadership Abilities | | |

Goals & Development Plan

- Goals Achieved: ______
- Training or Support Required: ______

Final Remarks

- Employee Feedback: ______
- Final Rating: ______

Signatures

- Employee: _____ Date: _____
- Reviewer: _____ Date: _____