

# Performance Appraisal Review Form

## Employee Information

- Name: \_\_\_\_\_
- Job Title: \_\_\_\_\_
- Department: \_\_\_\_\_
- Supervisor Name: \_\_\_\_\_
- Review Period: From \_\_\_\_\_ To \_\_\_\_\_

## Evaluation Metrics

Performance Aspect	Score (1-10)	Reviewer Comments	Employee Comments
Job Proficiency			
Goal Achievement			
Attendance & Punctuality			
Customer Service			
Conflict Resolution			
Project Management			
Innovation & Creativity			
Time Management			

## Employee's Self-Assessment

- What accomplishments are you most proud of?

\_\_\_\_\_

- What challenges did you face?

\_\_\_\_\_

- What support do you need for improvement?

\_\_\_\_\_

### Supervisor's Recommendations

- Promotion Consideration:  Yes  No
- Salary Increase Recommendation:  Yes  No
- Training/Skill Development:  Yes  No

### Final Review & Signatures

- Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_
- Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_
- HR Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_