

Employee Evaluations

Name:
Date:

Date of Hire:
Employee ID:

Performance

Satisfactory

Not Satisfactory

N/A

Works well with others?

Meets deadlines?

Organization/Prioritizing

Dependability

Tardiness

Absences

Willing to work over time?

Appearance

Personal Hygiene

Follows company dress code?

For Office use only

Comments:

Employee Signature

Date

Witness Signature

Date