

30 DAY EMPLOYEE EVALUATION



EMPLOYEE INFORMATION

Employee Name	
Employee ID	
Job Title	
Department	
Manager	
Date	
Review Period	



RATINGS

	(1) Poor	(2) Fair	(3) Satisfactory	(4) Good	(5) Excellent
Job knowledge					
Comments					
Work quality					
Comments					
Innovative thinking					
Comments					
Attendance					
Comments					
Productivity					
Comments					
Communication					
Comments					
Dependability					
Comments					
Problem solving					
Comments					
Responsibility					
Comments					
Administration					
Comments					



EVALUATION



GOALS