

Four-point Scale Performance Review

Employee Name:

Title of Position:

Department:

Reports to:

Employment Type:

Date of Review:

Overview of Position/ Job Purpose:

[Enter job duties here]

Competencies	1 - Poor	2 - Average	3 - Above Average	4 - Excellent
1. Processes Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
2. Team / People Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
3. Driving for Results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
4. Analytical Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
5. Strategic Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
6. Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
7. Ambition / Drive for Success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:				
8. Passion & Dedication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
9. Communication Skills (Verbal & Written)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
10. Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

Overall Rating:

- ☐ 1 - Poor
- ☐ 2 - Average
- ☐ 3 - Above Average
- ☐ 4 - Excellent

Milestones/Improvements Required	Expected Date
1 -	
2 -	
3 -	

Final Comments:

Signature of Manager: _____ **Date:** _____

Signature of Employee: _____ **Date:** _____