

## Performance Evaluation Form Template

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Employee Name		Date of Evaluation	
Employee Job Title		Evaluator Name	
Date of Hire		Evaluation Period	

### Rating Scale

For each area evaluated on this form, select the rating that best describes the employee's performance as assessed during the evaluation period.

**5. Outstanding:** This rating is for employees who are not only exceeding the requirements of their position, but who are already performing at a level higher than their current position.

**4. Exceeds Expectations:** This rating is for employees who are exceeding the requirements of their position, but not yet performing at a level higher than their current position.

**3. Meets Expectations:** This rating is for employees who are meeting all the requirements of their position.

**2. Does Not Meet Expectations:** This rating is for employees who are meeting the basic requirements of their position, but not all of the requirements of their position.

**1. Unsatisfactory:** This rating is for employees who are not meeting any of the basic requirements of their position.

### Position Description



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Clinical Goal:	Rating:
Evaluator Comments:	
Employee Comments:	
Actions:	

Professional Development Goal:	Rating:
Evaluator Comments:	
Employee Comments:	
Actions:	

Organizational Goal:	Rating:
Evaluator Comments:	
Employee Comments:	
Actions:	

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**Additional Comments:**

Evaluator Comments:

Employee Comments:

This evaluation was completed (check one) \_\_\_ in person \_\_\_ by phone \_\_\_ by email on \_\_\_\_\_.

**Evaluator Name:**

\_\_\_\_\_

**Employee Name:**

\_\_\_\_\_

**Evaluator Signature:**

\_\_\_\_\_

**Employee Signature:**

\_\_\_\_\_