

WESTERN IDAHO EMPLOYEE SERVICES, INC.

Performance Appraisal

Employee Name _____ Date ___/___/___

Department _____ Position _____

Reason For Review

Regular Merit End Probation Other _____

10- Top in Group or Dept.

9- Exceptional Performance

8- Consistent High Quality Performance

7- Significantly Above Average

6- Slightly Above Average

5- Average for Group

4- Below Average for Group

3- Needs Some Improvement

2- Needs Much Improvement

1- Barely Satisfactory

0- Totally Unsatisfactory

ATTRIBUTES

RATINGS

COMMENTS

1. QUALITY OF WORK OUTPUT _____

2. COMPETENCE- JOB
KNOWLEDGE _____

3. PRODUCTIVITY- AMOUNT
OF WORK _____

4. RELIABILITY- GETS JOB
DONE ON TIME _____

5. FOLLOWS RULES- ADHERES
TO COMPANY POLICIES AND
SAFETY RULES _____

6. AVAILABILITY- WORK
ATTENDANCE _____

ATTRIBUTES	RATINGS	COMMENTS
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7. **PERSONAL SKILLS- ABILITY TO GET ALONG WITH SUPERVISOR AND CO-WORKERS** _____

8. **MOTIVATION- SEEMS INTERESTED IN ASSUMING MORE RESPONSIBILITY** _____

9. **ATTITUDE- POSITIVE FEELING TOWRDS COMPANY AND JOB** _____

10. **OVERALL RATING (TOTAL PTS. + 9)** _____

CHANGES

1. **Improvements or Declines During this Period**

2. **Needs Improvement of Help In:**

Discussed with employee ____/ ____/ ____

Supervisor's Signature _____

Employee's Signature _____