



VBY YOUTH ON BOARD

## **EMPLOYEE PERFORMANCE REVIEW**

**Goal:** to help the employer and employee build on the strengths of the youth and identify those areas the employee needs improvement to be more effective and efficient in his/her job.

**Length:** Performance Review to be completed by manager or supervisor during employee's first week; during employee's first month; within three months and upon completion of the project.

### **Employee Information**

**Date** \_\_\_\_\_

**Organizations Name** \_\_\_\_\_

**Performance Review Completed by** \_\_\_\_\_  
Name Title

**Employee's Name** \_\_\_\_\_  
First Name Last Name

**Period for review:**

Week 4       Week 12       Week 20

**Instructions:** Please rate all of the following characteristics and insert any comments you may have.

<b>Performance Evaluation</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Comments</b>
Job Knowledge					
Productivity					
Work Quality					
Technical Skills					
Work Consistency					
Enthusiasm					
Cooperation					
Attitude					
Initiative					
Work Relations					
Creativity					
Punctuality					
Attendance					
Dependability					
Communication Skills					
<b>Overall Rating</b>					

<b>Goals</b>
<b>1. Achieved goals set in previous review?</b>
<b>Comments:</b>

**2. Goals for Next Review Period.**

**Comments:**

**Comments and approval**

**Comments:**

Employee Signature \_\_\_\_\_

Reviewer Signature \_\_\_\_\_

Date: \_\_\_\_\_



