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# Employee Evaluation *Please use this form and include examples in each comment section below to support FY26 merit raise recommendations.*

## Employee Information

| Name | Click or tap here to enter text. | | Employee ID | Click or tap here to enter text. | |
| --- | --- | --- | --- | --- | --- |
| Job Title | Click or tap here to enter text. | | Date | | Click or tap to enter a date. |
| Department | Click or tap here to enter text. | | Manager | Click or tap here to enter text. | |
| Review Period | FY24 (March 2024 – March 2025) |  | | | |

## Ratings

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | 1 = Unacceptable | | 2 = Needs Improvement | | 3 = Achieves Expectations | | 4 = Exceeds Expectations | | |
| Job Knowledge | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Work Quality | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Attendance / Punctuality | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Initiative | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Communication / Listening Skills | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Dependability | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Teamwork | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Other / Manager Discretion | |  | |  | |  | |  | | |
| Comments | Click or tap here to enter text. | | | | | | | | |
| Overall Rating (average the rating numbers above) | |  |  | |  | |  | |

## Evaluation

|  |  |
| --- | --- |
| Additional Comments | Click or tap here to enter text. |
| Goals FOR NEXT REVIEW PERIOD (as agreed upon by employee and manager) | Click or tap here to enter text. |

## Verification of Review

|  |  |  |  |
| --- | --- | --- | --- |
| By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation. (Please save this form as a PDF file so that you can electronically sign and date.) | | | |
| Employee Signature |  | Date |  |
| Manager Signature |  | Date |  |