SERINO COYNE PERFORMANCE REVIEW FORM

HUMAN RESOURCES

Employee: Manager:

Job Title: Department:

Hire Date: Evaluation Date:

1. HOW’S IT GOING (Focus on successes, accomplishments & contributions to the team/agency/DE&1 efforts)
2. AREAS OF IMPROVEMENT (Focus on specific areas for improvement, e.g. time management, presentation, technical skills, or other opportunities to help improve or expand job performance)
3. PROFESSIONAL DEVELOPMENT (Include action items to further career growth and trajectory).
4. IN CLOSING (Provide an overall summary with additional comments you would like to share)

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Employee Signature / Date Manager Signature / Date