



Employee Performance Review

Today's Date: _____

Employee's Name: _____

Length of Employment: _____

Position: _____

Place an "X" in the applicable box

	Below Expectations	Meets Expectations	Exceeds Expectations
Productivity			
Quality of Work			
Teamwork			
Attendance/Punctuality			
Ethic/Attitude			
Follows Directions			
Initiative			

Comments:

Current Rate of Pay: _____ Increase (if applicable): _____ Effective Date: _____

Employee Signature: _____

Date: _____

Client/Mgr Signature: _____

Date: _____

CMG On-Site Rep: _____

Date: _____