

# EMPLOYEE EVALUATION

\_\_\_\_\_  
Property Name

\_\_\_\_\_  
Employee Name

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

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

Last Review Date: \_\_\_\_\_

**Reason for Review**

- 30 Day
- 60 Day
- 90 Day
- Annual
- Raise
- Counseling

**Evaluation**

	Excellent	Good	Fair	Poor
Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Items Discussed:

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Employee Response:

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\_\_\_\_\_  
Manager's Signature

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

# EMPLOYEE EVALUATION

Employee Name \_\_\_\_\_

Rate on a scale of **1** to **10** (5 = Fair)

## BOOKKEEPER

	Rating	Comments
Availability		
Cooperation		
Work / Accuracy		
Work / Promptness		
Telephone Manner		
Professional Image		
Overall Ability		

## OCCUPANCY SPECIALIST

	Rating	Comments
Availability		
Cooperation		
Work / Accuracy		
Work / Promptness		
Telephone Manner		
Professional Image		
Overall Ability		

Overall Vacancy	
Turnover (Average)	
Average Delinquencies	
HUD Inspection	
Cos Designation	