

# Performance Review

Team Member \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Work Related Goals	Difficulty	% Complete (previous review)

Books Read (apart from staff reading)

Personal Goals	Difficulty	% Complete (previous review)

Thoughts for discussion

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

Note: Bring this form to the next review after adding percentage of goals accomplished