

Acrobat

outsourcing
Your Hospitality Staffing Professionals

Employee Performance Review

EMPLOYEE INFORMATION		Date of Review	
Employee Name	Claudia Motino	Date	
Job Title	Porter	Manager	
Department	Porter		
Review Period	90 Days		

RATINGS	1	1.5	2	2.5	3	3.5	4	4.5	5
	Unacceptable		Needs Improvement		Meets Expectations		Exceeds Expectation		Outstanding
Work Quality & Job Knowledge									
Technical Ability	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Knows time/place for her assignments								
Work Quality	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Floors are very thorough								
Job Knowledge	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Knows exactly what the floors need								
Creativity	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Finds ways to accomplish her assignments								
Productivity	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Always working								
Dependability									
Attendance/Punctuality	☐	☐	☐	☐	☐	☐	☒	☐	☐
Comments/ Specific Accomplishments									
Reliability/Timeliness	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	On time, communicates when late								
Consistency	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Consistent with communicating with supervisors								
Professionalism									
Teamwork	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Works well with porter team								
Communication	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments									
Initiative	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Completes all duties assigned to her								
Time Management	☐	☐	☐	☐	☐	☐	☐	☐	☒
Comments/ Specific Accomplishments	Find ways to orchestrate her breaks accordingly to avoid peak hours								
Work Quality & Job Knowledge 5 Dependability 4.5 Overall Rating 4.5 Professionalism 4.5 Average Rating 4.5									

EVALUATION	
Additional Comments	Work on breaks - right place/right time
Action Plan	

VERIFICATION OF REVIEWS	
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.	
Employee Signature	Claudia Motino
Manager Signature	
Date	
Date	

18/hr
19.50 - Carl recommends 18H

she would live \$20