



HOSPITALITY SERVICES TSC GROUP

Employee Performance Review

EMPLOYEE INFORMATION

Employee Name Ricardo Soler
Job Title Beverage Station Porter
Department Stripe-SF
Review Period _____ to _____

Date of Review 12/16/2022
Date 12/16/2022
Manager Jaime Barnhart

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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Work Quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Job Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Creativity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Productivity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments	If clarification is needed, please ask for more information of the tasks being asked of you								

1 1.5 2 2.5 3 3.5 4 4.5 5
Unacceptable Needs Improvement Meets Expectations Exceeds Expectation Outstanding

Dependability									
Attendance/Punctuality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Reliability/Timeliness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Consistency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									

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Professionalism									
Teamwork	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments									
Time Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments/ Specific Accomplishments	Be mindful of when to take breaks as well as utilize downtime more efficiently (assist with the line)								

Overall Rating

Work Quality & Job Knowledge _____ Dependability _____ Professionalism _____ Average Rating _____

EVALUATION

Additional Comments Take more initiative with additional tasks surrounding the beverage station, help with deep cleaning, utilize downtime
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
Manager Signature

Date
Date

5/11/23
5/11/23