



2211 New Street 100 E. Cotuit, MA 02541
617.66.6014 x100

PERFORMANCE EVALUATION REPORT FORM

Name of Employee: JAMES RYAN OMAYAN

Date of Rating: MARCH 24, 2016

Date Hired: NOV. 24, 2015

Position: INVENTORY CONTROLLER

Location: BOARD

Department: AUDIT DEPARTMENT

Rating Period: MARCH 1-31

Purpose of Rating: EVALUATION

Instruction: Please review notes on Guide to performance appraisal before accomplishing this form.

FACTORS	RATING				POINTS
1. KNOWLEDGE OF WORK	Has exceptional knowledge of his own & related work.	Has required knowledge of own & related work.	Has required knowledge of own work only.	Needs additional instruction and guidance.	6
	9 to 10 pts.	7 to 8 pts.	5 to 6 pts.	1 to 4 pts.	
	Remarks:				
2. PRODUCTIVITY	Usually exceeds standards.	Meets standards.	Seldom meets standards.	Never meets standards.	29
	36 to 40 pts.	30 to 35 pts.	20 to 29 pts.	1 to 19 pts.	
	Remarks:				
3. INITIATIVE	Always	Usually	Sometimes	Rarely	6
	9 to 10 pts.	7 to 8 pts.	5 to 6 pts.	1 to 4 pts.	
	Remarks:				
4. DEDICATION TO DUTY	Always dedicated to duty.	Usually dedicated to duty.	Sometimes dedicated to duty.	Rarely responds to company needs.	5
	9 to 10 pts.	8 pts.	5 to 7 pts.	1 to 4 pts.	
	Remarks:				
5. COOPERATION	Always cooperative	Usually cooperative	Sometimes cooperative	Rarely cooperative	7
	9 to 10 pts.	8 pts.	5 to 7 pts.	1 to 4 pts.	
	Remarks:				
6. ATTENDANCE & PUNCTUALITY:	Tardiness w/n the allowable no. or less.	With written warning/s	With one (1) day suspension	With 3 days suspension.	7
		(1st Offense)	(2nd Offense)	(3rd Offense)	
	9 to 10 pts.	7 to 8 pts.	5 to 6 pts.	1 to 4 pts.	
7. SAFETY AND / OR HOUSEKEEPING	No record of t/infraction against our safety/ housekeeping rules	No record of accident but w/ 1 infraction against our safety/ housekeeping rules	No record of accident but w/ 2 infraction against our safety/ housekeeping rules	Had an accident or had more than 2 infractions against our safety/ housekeeping rules	10
	9 to 10 pts.	8 pts.	5 to 7 pts.	1 to 4 pts.	
	Remarks:				
TOTAL					70

Previous Challenges and Accomplishments:

Areas of Strengths:

Areas of Weaknesses / Development:

- productivity
- with TR received (cost life saving)
- work experience

Rated By

Printed Name & Signature

Date

(mm / dd / yy)

Acknowledged By

Employee Name

Printed Name & Signature

Date

(mm / dd / yy)

RECOMMENDATIONS:

Approved by : _____ Date Signed _____ mm / dd / yy

Approved by : _____ Date Signed _____ mm / dd / yy

President's Signature : _____ Date Signed _____ mm / dd / yy

EMPLOYEE DETAILS:

Date Hired: _____ Present Rate: _____
mm / dd / yy

Amount of Increase: _____

Date of Last Increase: _____
mm / dd / yy

Date Appointed to Present Position: _____

New Rate: _____

FOR HUMAN RESOURCE MANAGEMENT DEPARTMENT

Nature of Recommendation : _____

Reviewed by: _____

Approved Recommended Rate : _____

Human Resource Department

Approved Recommended Position : _____

Effectivity Date : _____
mm / dd / yy

PER RATING	DESCRIPTION
90-100	Outstanding
75-89	Above Average
50-74	Average
49 below	Below Average

Passing Rate