



PERFORMANCE EVALUATION REPORT FORM

Name of Employee: **ALCARAZ, PHOL JACOB P.** Date of Rating: _____ Date Hired: **MARCH 6, 2025**
 Position: **ADMIN UTILITY**
 Location: **SPI CALACA** Department: **OPERATIONS**
 Rating Period: **July 2025 to August 2025**
 Purpose of Rating: **5th Month 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.	8
	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.	35
	36 to 40 pts.	30 to 35 pts.	20 to 29 pts.	1 to 19 pts.	
	Remarks :				
3. INITIATIVE	Always	Usually	Sometimes	Rarely	9
	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.	9
	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	9
	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.	9
		(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/infracton against our safety/ housekeeping rules	No record of accident but w/ 1 infracton against our safety/ housekeeping rules	No record of accident but w/ 2 infracton against our safety/ housekeeping rules	Had an accident or had more than 2 infractons against our safety/ housekeeping rules	9
	9 to 10 pts.	8 pts.	5 to 7 pts.	1 to 4 pts.	
	Remarks :				
TOTAL					88

Previous Challenges and Accomplishments:

Areas of Strengths:

Areas of Weaknesses / Development:

Rated By : Princess Rodriguez
Printed Name & Signature
Date : 08/22/2025
(mm / dd / yy)

Acknowledged By: P. J.
Employee Name : Phil Jacob P. Alvarado
Printed Name & Signature
Date : 8-22-25
(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: 03/06/25 Present Rate: 540.00/Per Day
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: _____

Human Resource Department

Approved Recommended Rate : _____

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