**Candidate Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Skill Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## The Positional Evaluation is designed to objectively evaluate your performance in each position. You will use scoring parameters to rate yourself in each position. The Training Manager will also rate your performance. As part of the final wrap-up for each department, you and your Training Manager will meet to discuss your performance. Use the comments section on page 2 to explain your ratings. Place the signed copy of the evaluation in your Candidate File.

Rating Parameters: Your performance is based on a 1-2-3 Rating System. Rate your performance using the following criteria:

##### 3 – Meets Expectations (Performed at or above acceptable proficiency levels)

##### 2 – Needs Improvement (Did not perform at acceptable levels and **has *not*** **received** sufficient instruction/practice time to develop proficiency)

##### 1 – Unsatisfactory (Did not perform at acceptable levels and **has** **received** sufficient instruction/practice time to develop proficiency)

**Evaluation Definitions**

Below are the areas in which you are rated, including a definition for each.

|  |  |  |  |
| --- | --- | --- | --- |
| Term | Definition | Manager Rating | Candidate Rating |
| Job Knowledge | Ability to effectively apply knowledge to the job | 1 2 3 | 1 2 3 |
| Relationships | Ability to maintain open communication and cooperative relationships with Co-workers | 1 2 3 | 1 2 3 |
| Leadership | Ability to lead or direct others; taking initiative by immediately aiding or assisting as needs arise | 1 2 3 | 1 2 3 |
| Appearance | Consistently presents a professional image | 1 2 3 | 1 2 3 |
| Dependability | Consistent attendance, punctuality, and responsiveness | 1 2 3 | 1 2 3 |
| Guest Hospitality | Activities related to meeting and exceeding Guests’ expectations | 1 2 3 | 1 2 3 |

Candidate Comments:

Manager Comments:

Manager Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Place completed form in the Candidate’s File.**