

Leadership Role Performance Review

Name:

Role Title:

Review Period:

Reviewer:

Date:

Performance Criteria

Competency	Rating (1-5)	Comments
Vision & Strategy	<input type="text"/>	<input type="text"/>
Decision Making	<input type="text"/>	<input type="text"/>
Team Leadership	<input type="text"/>	<input type="text"/>
Communication	<input type="text"/>	<input type="text"/>
Accountability	<input type="text"/>	<input type="text"/>

Strengths

Areas for Improvement

Development Goals & Action Plan

Additional Comments