

Retail Store Staff Performance Evaluation Form

Employee Name

Position

Evaluation Period

e.g. Jan - Jun 2024

Evaluator Name

Date

Performance Criteria

Criteria	Rating (1-5)	Comments
Customer Service	Select <input type="button" value="▼"/>	<input type="text"/>
Attendance & Punctuality	Select <input type="button" value="▼"/>	<input type="text"/>
Sales Performance	Select <input type="button" value="▼"/>	<input type="text"/>
Teamwork	Select <input type="button" value="▼"/>	<input type="text"/>
Product Knowledge	Select <input type="button" value="▼"/>	<input type="text"/>

Overall Comments & Feedback

Evaluator's Comments

Employee's Comments

Evaluator Signature

Employee Signature