

Worker Evaluation Questionnaire

This worksheet is designed to be used by cooperative members to help inform a staff member's annual evaluation. Please be as specific as possible in your responses.

Name of staff member being evaluated:

Date:

- What are some of this staff member's strengths?
- What are some areas in which you think the staff member needs improvement or support?
- Based on your experience working with this staff member, do you have any recommendations for professional development/support?
- If you work in a team with this worker, please state which team and refer to your team goals. How has this worker contributed to these goals?
- Is there anything else that you would like to share to help with this staff member's evaluation?