

QUARTERLY STAFF REVIEW



MINISTRY OR PROGRAM NAME

TODAY'S DATE

PERSON IN CHARGE

SECTION 1: SCORECARD

(1 is lowest, 10 is highest)

SCORE

How well does this ministry or program reflect Church Core Value #1?

How well does this ministry or program reflect Church Core Value #2?

How well does this ministry or program reflect Church Core Value #3?

How well does this ministry or program reflect Church Core Value #4?

How well does this ministry or program reflect Church Core Value #5?

SECTION 2: SCORECARD

(1 is lowest, 10 is highest)

Staff Core Value or Key Skill #1

Staff Core Value or Key Skill #2

Staff Core Value or Key Skill #3

Staff Core Value or Key Skill #4



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Staff Core Value or Key Skill #5

Staff Core Value or Key Skill #6

Staff Core Value or Key Skill #7

SECTION 3: ROLES & GOALS

1. What are your primary areas of responsibility and how are you doing with them?

2. What are your primary objectives and how did you make progress last quarter?

SECTION 4: JOB PERFORMANCE

1. Over the last 90 days, what do you consider to be your greatest wins?

2. Over the last 90 days, what have you learned from things that didn't go so well?



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SECTION 5: NEXT STEPS

What are your goals for the next quarter?

Overall, this ministry or program is . . .

Outstanding Great Satisfactory Needs Improvement Unsatisfactory

Acknowledgement & Signature

I have reviewed this document and discussed the contents with my supervisor. My signature acknowledges the occurrence of this staff evaluation discussion.

STAFF MEMBER

DATE

SUPERVISOR

DATE

