

Name:	Associate #:	
Store # and Name:	Employment Date	
Reviewed By:	Work Group:	
Review Period:		

## RATING FOR AND S OR P MUST BE SUPPORTED WITH EXAMPLES WHEREVER THEY APPEAR.

Competencies					
Time Management / Training	Superior	Very Good	Meets Expectations	Needs Improvement	Poor
Accountability					
Time Management					
Training Completion					
Performance Factors	Superior	Very Good	Meets Expectations	Needs Improvement	Poor
Equipment Usage					
Accuracy					
Performance (see attached appendix)					
Merchandise Security					
Preferred Spirit Group	Superior	Very Good	Meets Expectations	Needs Improvement	Poor
Service Orientation					
Team Orientation					
Company Spirit					
РМА					
Hustle					

Interpersonal Skills	Superior	Very Good	Meets Expectations	Needs Improvement	Poor
Communication					
Effective Thinking					
Relationship Building					
Overall Rating	Superior	Very Good	Meets Expectations	Needs Improvement	Poor
Performance Review (Add the total together)					

Performance Review	
Associate Signature:	Date:
Manager Signature:	Date:

Growth Goal #1:	
Growth Goal #2:	
Growth Goal #3:	