

360' Feedback Form

Name of Appraisee		Post		Appraisal date	
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For questions 1 & 2 below please tick the appropriate box.

<p>1. How well do you know the appraisee?</p> <p>Extremely well <input type="checkbox"/> well <input type="checkbox"/> fairly well <input type="checkbox"/> hardly at all <input type="checkbox"/> not at all <input type="checkbox"/></p>
<p>2. How often does work bring you into contact with the appraisee?</p> <p>Daily <input type="checkbox"/> weekly <input type="checkbox"/> once every 2 weeks <input type="checkbox"/> monthly <input type="checkbox"/> less than once a month <input type="checkbox"/></p>

The questions below ask you to rate the appraisee's skills, please tick the appropriate box according to the following scale:

A – clear strength; B - moderate strength; C - moderate development need; D - clear development need; E - not observed e.g. no need for this skill to be used in the contact between appraisee and yourself.

Skill	Rating	Comments
Interaction with others relating to work.	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Listening	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Communication	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Diplomacy / sensitivity	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Negotiating / influencing	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	

Skill	Rating	Comments
Creativity / problem solving	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Team work and leadership	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Motivation	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Promotes the Authority in a positive light	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Planning and organising	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
Knowledge and expertise	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	