
PERFORMANCE FEEDBACK FORM

EMPLOYEE NAME: _____ DATE: _____

A) Here are five behaviors you should START doing, to become more successful.

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

B) Here are five behaviors you should STOP doing, to become more successful.

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

C) Here are five behaviors you should KEEP doing, to remain successful.

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

Employee Signature: _____

Supervisor Name: _____

Supervisor Signature: _____