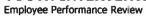
YOUTH INTERVENTION WORKER





EMPLOYEE INFORMATION	edrior i					
Name April Chapman			Employee 10	Employee 10		
Job Title Youth Intervention			Date O	Date Oct 27, 2020		
Department mc45 4I			Manager Chantelle Johnson			
Review Period Sept 6, 20		\$ 27,20				
RATINGS						
	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent	
Job Knowledge					Ø	
Comments STUPY DURING OF	THE.					
Work Quality					₩.	
Comments						
Attendance/Punctuality	0	0		D/		
Comments				,		
Initiative		. 0		B		
comments Comes up a	11th god	od idea	5 Arev	ent nig	ints,	
Communication/Listening Skills			0	2 4		
comments needs to	communi	æle a	little m	ore in	emails	
Dependability						
Comments						
Overall Rating (average the rating numbers above)						
EVALUATION					25.500	
ADDITIONAL COMMENTS						
GOALS (as agreed upon by Will employee and manager)	provide	at a	later ti	me.		
VERIFICATION OF REVIEW						
By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation						
Employee Signature	agrici	est	Date O	ct 27,	2020	
Manager Signature			Date			