

EMPLOYEE INFORMATION

Employee Name: _____

Employee Title: _____

Client: _____

Reviewer: _____

Date: _____

TARGETS

	TARGETS	ACTUAL
FINANCIAL STATEMENTS		
TAX RETURN		
REALIZATION		
HOURS		

JOB EXPECTATIONS # 1

RESULT: Exceeded Expectations Met Expectations Did not meet Expectations

JOB EXPECTATIONS # 2

RESULT: Exceeded Expectations Met Expectations Did not meet Expectations

JOB EXPECTATIONS # 3

RESULT: Exceeded Expectations Met Expectations Did not meet Expectations



SELF ACCOUNTABILITY

1. Was the job completed on or before deadline without necessity of frequent reminders?
 Yes No
2. When problems were brought to the manager/partner's attention, were solutions brought with it?
 Yes No
3. Was the job performed to the best of their ability? (Effort, Attitude and Desire)
 Yes No
4. Did the staff member exhibit CBM professional standards while interacting with the client?
 Yes No

If you answered No to any of the above; describe instances noted and the steps for improvement below.

AREAS TO IMPROVE AND OTHER COMMENTS

COMMUNICATION OF RESULTS

Employee Signature: _____

Reviewer Signature: _____

Partner Signature (if > 65 hours): _____

Date of Review: _____