

RECORD OF EMPLOYEE PERFORMANCE

(Commendation)

Employee's Name:

Date *(mm/dd/yyyy)*:

Classification:

Work Location:

Department:

TASK WHICH EMPLOYEE HAS DONE WELL:

Rater's Signature: _____

Reviewer's Signature: _____

EMPLOYEE:

Your signature means you have seen and read the above report, and that you have been commended by your immediate supervisor (rater).

Employee's Signature: _____

Date: _____