



**ROYAL CIVIL SERVICE COMMISSION
APPRAISAL FORM FOR OPERATIONAL CATEGORY**



For the period: _____ to _____

Agency:

Name of the Employee:

Employee ID No:

Position Title:

Name of the Supervisor:

Core Competency	Rating (Supervisor):	Comments	
1. Integrity			
2. Attitude			
3. Punctuality			
4. Courtesy			
5.			
6.			
7.			
TOTAL		Average rating*	

**For average rating, divide the 'Total' by 7*

(Signature of the Employee)

(Signature of the Supervisor)

(Signature of the Manager)