



# Front of House - Employee Progress Report

☐ Darien    ☐ Greenwich    ☐ Old Greenwich    ☐ Riverside    ☐ Westport

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Employee: \_\_\_\_\_

Position: \_\_\_\_\_ Reviewer: \_\_\_\_\_

How many months have they worked in this position for you? \_\_\_\_\_

Please rate 1 to 5

(1 = unacceptable, 3 = expected, 5 = outstanding)

<u>Date</u>	
<input type="checkbox"/> Chris	_____
<input type="checkbox"/> Greg	_____
<input type="checkbox"/> HR	

	1	2	3	4	5	N/A
The employee follow our Policies & Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Punctual/reliable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Works well with team members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fulfills tasks/is a hard worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is trustworthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Knowledgeable, Menus, PLUs, etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Good Communicator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Flexible Schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Follows Dress code (name tag)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have a Good Customer Services (Good morning, etc. – at the store & phone)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Works Sanitarily/Orderly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	N/A
Able to Open			
Able to Close			
Able to take special orders			
Able to take cake orders			
Able to order on portal			

Comments: \_\_\_\_\_

\_\_\_\_\_

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