CONFIDENTIAL INTERVIEW/EVALUATION FORM

Position Title:		**Date:**	
Position #:		**Interviewer:**	
Applicant:		**Total Score:**	

CRITICAL JOB REQUIREMENTS	**BELOW AVERAGE** Not as Strong as Needed		**GOOD** Meets Job Needs or Minimum Requirements		**VERY GOOD** More Than Meets Job Needs-Requirements	
1.	**1**	**2**	**3**	**4**	**5**	**6**
2.	**1**	**2**	**3**	**4**	**5**	**6**
3.	**1**	**2**	**3**	**4**	**5**	**6**
4.	**1**	**2**	**3**	**4**	**5**	**6**
5.	**1**	**2**	**3**	**4**	**5**	**6**
6.	**1**	**2**	**3**	**4**	**5**	**6**
7.	**1**	**2**	**3**	**4**	**5**	**6**
8.	**1**	**2**	**3**	**4**	**5**	**6**
9.	**1**	**2**	**3**	**4**	**5**	**6**
10.	**1**	**2**	**3**	**4**	**5**	**6**

STRENGTHS _____

WEAKNESSES _____

ADDITIONAL COMMENTS _____

Retention Schedule: Upon completion, this form shall be retained for two (2) years in the local personnel office at the hiring facility, as part of the Selection Package.

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