**Chef Performance Appraisal Form**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position: Chef**

Department: Kitchen

Appraisal Period: \_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_

Reviewer/Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_

(Rating Scale: 1 = Unsatisfactory, 2 = Needs Improvement, 3 = Meets Expectations, 4 = Exceeds Expectations, 5 = Outstanding)

1. **Job Knowledge & Culinary Skills**

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Rating (1-5)** | **Supervisor**  **Rating** | **Comments** |
| Demonstrates expertise in food preparation, cooking techniques, and presentation. |  |  |  |
| Stays updated with culinary trends and innovations. |  |  |  |
| Ensures consistency in food quality and taste. |  |  |  |
| Knowledge of food safety, hygiene, and sanitation standards. |  |  |  |
| Which menu items have been the most least successful, and why |  |  |  |
| How do you approach introducing new dishes or seasonal specials |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Leadership & Team Management**

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Rating (1-5)** | **Supervisor**  **Rating** | **Comments** |
| Effectively leads and motivates kitchen staff. |  |  |  |
| Delegates tasks efficiently and ensures smooth kitchen operations. |  |  |  |
| Handles conflicts professionally and fosters teamwork. |  |  |  |
| Trains and mentors junior chefs and kitchen staff. |  |  |  |
| What challenges have you faced with staffing or team morale, and how did you address them? |  |  |  |
| Consistence on punctuality and attendance at work |  |  |  |
| Communicate effectively with kitchen staff, waiters and management to ensure smooth service and listen to feedback |  |  |  |
| Uses professional and respectful language even under pressure |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Operational Efficiency & Cost Control**

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Rating (1-5)** | **Supervisor**  **Rating** | **Comments** |
| Manages kitchen inventory and minimizes wastage. |  |  |  |
| Controls food costs while maintaining quality. |  |  |  |
| Ensures timely preparation and service during peak hours. |  |  |  |
| Implements efficient workflow and kitchen organization. |  |  |  |
| What processes or tools would help you run the kitchen more effectively |  |  |  |
| Have you identified any suppliers or sourcing changes that could benefit the restaurant? |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Creativity & Menu Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Rating (1-5)** | **Supervisor**  **Rating** | **Comments** |
| Introduces innovative dishes and seasonal menus. |  |  |  |
| Adapts to customer preferences and dietary requirements. |  |  |  |
| Balances creativity with cost-effectiveness. |  |  |  |
| Collaborates with management on menu pricing and promotions. |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Compliance & Safety Standards**

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Rating**  **(1-5)** | **Supervisor**  **Rating** | **Comments** |
| Follows HACCP (Hazard Analysis and Critical Control Points) and food safety regulations. |  |  |  |
| Ensures kitchen cleanliness and proper equipment maintenance. |  |  |  |
| Together as a team adheres to health and safety policies |  |  |  |
| What records do you keep for healthy and safety |  |  |  |
| Conducts regular staff training on hygiene practices. |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Communication & Customer Satisfaction**

|  |  |  |  |
| --- | --- | --- | --- |
| Criteria | Staff  Rating | Supervisor  Rating | Comments |
| Communicates effectively with F&B team and management. |  |  |  |
| Addresses customer feedback and complaints professionally. |  |  |  |
| Maintains a positive relationship with suppliers and vendors. |  |  |  |
| Ensures guest satisfaction through food quality and presentation. |  |  |  |
| I come out of kitchen and check customer satisfaction when space allows |  |  |  |

**Rating:**

☐ Excellent ☐ Good ☐ Satisfactory ☐ Needs Improvement ☐ Unsatisfactory

**Comments:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Overall Performance Rating:**

☐ Outstanding (Exceeds expectations in all areas)

☐ Good (Meets and occasionally exceeds expectations)

☐ Satisfactory (Meets job requirements)

☐ Needs Improvement (Below expectations in some areas)

Unsatisfactory (Fails to meet job requirements)

|  |  |
| --- | --- |
| Write down your strength and weakness | |
| STRENGTH | WEAKNESS |
|  |  |

Strengths:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Areas for Improvement:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Training & Development Needs:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Reviewer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

Next Steps:

Performance Goals for Next Appraisal Period:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Follow-up Review Date (if applicable): \_\_\_\_\_\_\_\_